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Publications

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SECTION 1:
INTRODUCTION

SECTION 2:
INSTRUCTOR GUIDELINES

SECTION 3:
TEACHING AIDS

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INSTRUCTOR GUIDELINES

SECTION 3:
TEACHING AIDS

A training program on prevention in the drug field

Instructor's manual



Published by the **Addiction Research Foundation** in
cooperation with Health and Welfare Canada and the
Canadian Government Publishing Centre, Supply and Services
Canada

Toronto
1986

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Catalogue Number H39-91/1986E

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Design and Production: The Wright Impression Ltd.

Published by
Addiction Research Foundation
33 Russell Street
Toronto, Canada
M5S 2S1



Canadian Cataloguing in Publication Data

Torjman, Sherri Resin
A training program on prevention in the drug field. Instructor's manual.

Written by Sherri Torjman
Supplement to: Torjman, Sherri Resin. Prevention in the drug field. Issued also in French under title: Programme de formation en prévention dans le domaine des drogues, Guide du moniteur.
ISBN 0-88868-118-6

1. Drug Abuse - Prevention. 2. Drug Abuse - Study and teaching. I. Torjman, Sherri Resin. Prevention in the drug field. II. Addiction Research Foundation. III. Canada. Health and Welfare Canada. IV. Federal/Provincial Working Group on Alcohol Problems (Canada). National Planning Committee on Training. V. Title.

HV5801.T672 1986

362.2'9386

C86-093411-X

Printed and bound in Canada.

TABLE OF CONTENTS

TITLE	PAGE
PREFACE	1
ACKNOWLEDGMENTS	2
SECTION 1: INTRODUCTION	4
Purpose	5
Program Sponsorship	6
Selection of Participants	7
Format	8
Content	9
Teaching Methodologies	10
Teaching Aids	12
Reproduction of Materials	16
Time Guidelines	17
Instructor Preparation	18
Evaluation	19
Icebreaker Activity	20
SECTION 2: INSTRUCTOR GUIDELINES	22
Unit A: Essential Concepts and Strategies	23
Unit B: Change Agent Skills	55
Unit C: Program Planning and Implementation	91
SECTION 3: TEACHING AIDS	108
Handouts	
Learning Activities	
Visuals	
Skills Assessment Forms	
Quiz on Unit A	
Program Evaluation Form	

The Prevention Training in the Drug Field (PTDF) package is the culmination of five years of research and effort by the National Planning Committee on Training in the Addictions Field (NPC), a Working Group of the Federal Provincial Sub-Committee on Alcohol and Other Drug Problems.

Prevention became a national priority as a result of a survey conducted by the NPC during the summer of 1979. The idea of producing training materials for prevention workers in the drug field was then launched following a discussion paper on prevention presented to the NPC in Ottawa, April 1981. A Task Group, composed of representatives from the federal, provincial and territorial governments, was established to identify major areas of concern in the prevention field, the purpose and goals of the project as well as a model for the development of this project.

Six reports and working papers were developed at various stages of the project and presented to the Federal Provincial Sub-Committee on Alcohol and Other Drug Problems and the National Planning Committee for information purposes and approval of future steps in the development of the training document.

The package was tested at a workshop for community prevention workers and trainers (from 9 provinces and 2 territories) held in Edmonton, October 22-26, 1984. Critique was also sought from experts in the area of prevention and curriculum design. The gathered information was used in the preparation of this final version of the package.

The PTDF package provides a basic level of training developed primarily for trainers but may also be useful to community workers who have responsibilities for prevention activities. It has been prepared and written so that it can be used by many workers in the drug field.

The Task Group is proud to offer this training resource to the drug field. We hope the document will enhance the competence of those working in the drug prevention field.

The Task Group:

Tariq Bhatti, Chairman
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ACKNOWLEDGEMENTS

Many people contributed to the development of this resource. The National Planning Committee on Training in the Addictions Field (NPC) initiated the project, set up our Task Group and provided guidance throughout. We worked closely with the writer, Sherri Torjman (on contract to the Health Promotion Directorate), providing support and advice during the various stages of the project. Very special thanks are due to Ms. Torjman, who researched, compiled and wrote the various working papers, the Instructor Manual and the Monographs. She has made a major contribution to this project.

The content was reviewed by Dr. Cheryl Perry of the University of Minnesota and Dr. Alfred McAlister of the University of Texas. Dr. James Thornton of the University of British Columbia commented on the curriculum design aspect.

Many others have been involved in the development of this project, whether making comments, testing materials, or typing and word processing. These persons, unfortunately too many to cite by name, are with the Government of Canada, the provinces and territories.

To all of the above, we express sincere appreciation.

The Task Group.

INTRODUCTION

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The purpose of this training program is:

- to provide participants with the knowledge they require to undertake a prevention program in the drug field;
- to equip participants with the skills they require to undertake a prevention program in the drug field;
- to promote the attitudes that are appropriate to the implementation of a prevention program in this field.

PROGRAM SPONSORSHIP

This training program has been developed for use by the alcohol and drug commissions and foundations throughout Canada. Each jurisdiction will be responsible for selecting a program instructor. The individual selected should have experience in training and in leading small groups. He or she may or may not have had any experience in prevention but should be thoroughly familiar with the commission's or foundation's policies and activities in this field.

In some jurisdictions, it may be necessary to bring in other resources such as group workers from community agencies to help lead some of the sessions. This is entirely acceptable and should, in fact, be encouraged when it is felt that such resources might enhance the session.

It also may be necessary in some jurisdictions to have more than one instructor if there are individuals in the organization who are strong in different areas. For example, an individual who has extensive experience in the field of prevention may be asked to help provide the instruction for the first Unit. When more than one person is involved as instructor, however, it is important for these individuals to work closely together to ensure that their methods of presentation and style are not too divergent. Such inconsistencies may interfere with participants' learning.

While this training program is intended primarily for the workers employed by alcohol and drug commissions and foundations, it may be used by any community worker interested in the field of prevention. For example, public health nurses, social workers, teachers, or community recreation workers are potential candidates. The training program would be appropriate for individuals already employed in the field of prevention as well as for those individuals about to embark upon a project in this area.

There are no educational prerequisites for this training program. It is desirable, however, that participants have some basic communication skills, such as meeting with individuals on a one-to-one basis (interviewing skills), which they may have acquired through their educational background or work experience. A supervisor may wish to provide some individualized training to help acquaint individuals who lack basic communication skills. Potential candidates should be genuinely interested in the field of prevention. Instructors who are not acquainted with potential candidates should meet with them in advance to learn more about their educational background, work experience, and their expectations regarding the training program.

FORMAT

This training program consists of three major Units, each of which considers a different aspect of prevention (see discussion on Content). Each Unit, in turn, is divided into modules on specific aspects of the larger subject area. Each module is supplemented by a reading which can be found in the accompanying monograph (see discussion on Teaching Aids). The major components of this training program are outlined below:

UNIT	MODULE	MONOGRAPH
A: Essential Concepts and Strategies	6 modules	1
B: Change Agent Skills	8 modules	2
C: Program Planning and Implementation	4 modules	3

The modular format allows jurisdictions to select the Units or individual modules that would be most appropriate to the learning needs of the participants. Some jurisdictions may want to include all three Units as part of their training program in prevention. Other jurisdictions may wish to exclude certain modules because their staff members have basic skills in certain areas.

While this training program fits together as an entire package, its modular format allows for flexibility. Jurisdictions can:

- select certain Units;
- select certain modules;
- select particular components of certain modules;
- mix and match particular components of different modules;
- use the monographs only;
- use the monographs to review certain subjects and use the modules for other subjects.

It should be noted as well that this training program does not have to be employed only as a course or as a training institute. Its components also can be used selectively for workshops, group meetings and individualized instruction.

This training program is divided into three major Units: Essential Concepts and Strategies, Change Agent Skills, Program Planning and Implementation. Each is described more fully below.

UNIT A: ESSENTIAL CONCEPTS AND STRATEGIES

This Unit focuses primarily on the knowledge that participants require to undertake prevention programs in their communities. The Unit is divided into the following six modules:

- Module 1: Historical Perspectives
- Module 2: Drug Use: An Overview
- Module 3: Prevention
- Module 4: Prevention Strategies
- Module 5: Contextual Factors
- Module 6: Prevention Issues

UNIT B: CHANGE AGENT SKILLS

This Unit focuses on the key skills that prevention workers must master in order to undertake a prevention program effectively. The Unit consists of the following eight modules:

- Module 1: The Change Process
- Module 2: Volunteers
- Module 3: Using the Media
- Module 4: Presentations
- Module 5: Networking
- Module 6: Meetings
- Module 7: Lobbying
- Module 8: Community Mobilization

UNIT C: PROGRAM PLANNING AND IMPLEMENTATION

The final Unit of this training program is concerned with the actual implementation of the preventive effort. Four major topics are considered in the following modules:

- Module 1: Program Planning
- Module 2: Program Management
- Module 3: Personnel Management
- Module 4: Evaluation

TEACHING METHODOLOGIES

The content of this training program is imparted through a variety of teaching methodologies. While there is a great deal of information presented, the training program is largely experiential in nature. That is, it attempts to involve participants directly in learning the various concepts and skills. For example, participants develop plans for a media campaign; prepare and present verbal reports; engage in lobbying activity. The experiential method of learning has been shown to be a highly successful teaching methodology with adults who can bring their own knowledge and experience to the situation.

These direct learning experiences are accompanied and reinforced by verbal presentations and reading materials. The instructor should encourage maximum participation by all members by asking for their comments, questions and concerns. Throughout the training program, the instructor should inquire as to whether participants fully understand the concepts presented or skills to be mastered. Instructors who do not feel that they have sufficient skills to lead certain sessions should seek outside assistance from colleagues, from group leaders in community organizations such as family service centres, or from staff of community college and social work programs.

It should be noted that instructors should feel free to change the examples provided in order to make the exercise or discussion more relevant to the local "scene". For example, there may be a piece of recently introduced provincial legislation or a prevention program that has been set up in the jurisdiction. Instructors are strongly encouraged to adapt the content to take into account pertinent developments in their respective jurisdictions. The teaching methodologies employed are outlined below:

Presentation: Instructors are required to present material on specific areas of content. Participants should be informed that they may take notes if they choose, they can simply listen, or they can bring in a tape recorder (if the instructor feels this will not be disruptive).

Large Group Discussion: The instructor is expected to lead discussions focused on a particular subject area or a certain set of questions. Often the use of a flipchart (or blackboard) is recommended to help identify the key points arising out of the discussion.

Small Group Discussions: On several occasions throughout the training program, participants are asked to discuss certain subjects or issues in small groups. Four to five individuals is a good size unless otherwise indicated in the Instructor Guidelines.

The instructor has several options regarding the way in which groups are formed. First, participants can be asked to turn to their "neighbours" and to meet with the group members who are sitting next to them. The disadvantage of this method of group formation is that some participants may sit next to their friends and the composition of the small groups would remain the same throughout the training program. Instructors may randomly form groups (for example, by drawing names from a hat) or may decide in advance which individuals will participate in which group. The decision regarding group formation is left to the discretion of the instructor and depends largely upon the dynamics of the group. In general, there should be a good mix of more active and less active participants in each group.

In addition, group composition should be varied frequently so as to give different participants an opportunity to work with each other. In some cases, groups are asked to designate one member of the group as a recorder. That individual is expected to make a presentation to the other members about the group's discussions and decisions. Recorders should be encouraged to make their presentations as brief and as clear as possible.

Simulation: Much of the content in this training program is taught through participants actively working with the concepts being presented. The simulations range from groups of two (dyads) to the entire membership of the group.

In the case of dyads, the instructor once again can decide whether participants can choose their own partner or should be assigned a partner to play particular roles. Again, there may be a tendency for dyads who feel comfortable with each other to remain together throughout the training program and gain no exposure to other participants. This situation should be avoided through instructor selection of the dyad membership. When there is an uneven number of participants, the instructor may be required to play one of the roles in order to complete a dyad.

It is highly desirable for instructors to demonstrate some of the skills prior to participants playing the assigned roles. Instructors may feel it necessary to involve an outside resource to help demonstrate these skills. Additional time may be allocated for this demonstration. It is essential for instructors to provide a great deal of support and reinforcement

throughout all simulations. While simulations are a highly effective teaching methodology, they can be also difficult and stressful for participants if ongoing support is not provided.

In some cases, participants will not have had a great deal of experience with large group simulations. Instructors may wish to drop some of the roles from these simulations and have more observers. Another option is to define the role more narrowly (i.e. tell the participants how to act in playing out that role). A third option is to bring in some resource people from inside or outside the alcohol and drug commission or foundation to take active roles and "move the simulation along".

Individual Learning Activity: On occasion, participants are expected to carry out an activity on their own. In most cases, they are asked to complete a learning activity (described below). The instructor should present the instructions and should ensure that all participants understand what is expected and the time parameters for completion of the activity. The instructor should remain available throughout to respond to any questions.

TEACHING AIDS

The training program consists of two major packages of material: the Instructor Manual and a set of three monographs which accompany the Manual. For each module, the Instructor Manual contains a list of instructions as to how the content is to be presented, what materials will be required for each methodology, and the time that particular activity should take. It should be stressed that the instructions are meant to be guidelines only. Instructors may want to present some of the material by employing different teaching methodologies. For example, the instructor may choose to delete certain activities if other activities have been expanded beyond the time limitations. (See discussion on "Time" below.)

Each module is prefaced by an introduction which outlines the purpose, rationale, learning objectives, time requirements, materials/equipment, and follow-up assignments for that module. Additional preparation which may have to be done by instructors or participants is also indicated where appropriate. Included as well in the preface to each module is an instructional plan which outlines the schedule for presentation of the content.

The teaching aids contained in this Instructor Manual include handouts, learning activities and visuals. These can be found in the "Materials" section of this Instructor Manual.

Handouts: Handouts are printed material in which information or concepts are presented. These handouts are distributed during or after the concepts have been discussed in class. After participants complete the training program, they will be able to keep the handouts as reference material for their work in the prevention field. It is the responsibility of the sponsoring organization to make arrangements for reproduction of the material from the master copies provided in the Instructor Manual. A list of handouts is provided below.

- Handout #1: "Outline of Program Content"
- Handout #2: "Learning Objectives: Unit A, Module 1"
- Handout #3: "Learning Objectives: Unit A, Module 2"
- Handout #4: "Correlates of Drug Use"
- Handout #5: "Learning Objectives: Unit A, Module 3"
- Handout #6: "Learning Objectives: Unit A, Module 4"
- Handout #7: "Ads on Alcohol"
- Handout #8: "Learning Objectives: Unit A, Module 5"
- Handout #9: "Learning Objectives: Unit A, Module 6"
- Handout #10: "Learning Objectives: Unit B, Module 1"
- Handout #11: "Five-Phase Model"
- Handout #12: "Learning Objectives: Unit B, Module 2"
- Handout #13: "Learning Objectives: Unit B, Module 3"
- Handout #14: "Sample Press Release"
- Handout #15: "Learning Objectives: Unit B, Module 4"
- Handout #16: "Learning Objectives: Unit B, Module 5"
- Handout #17: "Learning Objectives: Unit B, Module 6"
- Handout #18: "Learning Objectives: Unit B, Module 7"
- Handout #19: "Rules for Lobbying"
- Handout #20: "Learning Objectives: Unit B, Module 8"
- Handout #21: "Learning Objectives: Unit C, Module 1"
- Handout #22: "Checklist for Objectives"
- Handout #23: "Learning Objectives: Unit C, Module 2"
- Handout #24: "Learning Objectives: Unit C, Module 3"
- Handout #25: "Learning Objectives: Unit C, Module 4"

Learning Activities: These are the exercises that participants are expected to complete to help them understand or work with various concepts. These must be reproduced for distribution to participants. A list of learning activities is provided below.

- Learning Activity #1: "Alcohol Perspectives"
- Learning Activity #2: "Alcohol Policy"
- Learning Activity #2a: "Answers to 'Alcohol Policy'"
- Learning Activity #3: "Drug-Related Problems"

- Learning Activity #3a: "Sample Completed Worksheet"
- Learning Activity #4: "Correlates of Drug Use"
- Learning Activity #5: "Memorandum to Honorary Ministers"
- Learning Activity #6: "Reasons for Drinking"
- Learning Activity #7: "Skit on 'Booze'"
- Learning Activity #8: "Employing Controls"
- Learning Activity #9: "Barriers to Communication"
- Learning Activity #10: "Pumpkin's Problem"
- Learning Activity #11: "Environmental Design"
- Learning Activity #12: "Organizational Characteristics"
- Learning Activity #13: "Alcoholism Questionnaire"
- Learning Activity #13a: "Scoring the 'Alcoholism Questionnaire'"
- Learning Activity #14: "Mandate"
- Learning Activity #15: "Change Agent Roles"
- Learning Activity #16: "Volunteer Job Description"
- Learning Activity #17: "Networks"
- Learning Activity #18: "Planning Meetings"
- Learning Activity #19: "Community Assessment"
- Learning Activity #20: "Obtaining Resources"
- Learning Activity #21: "Recruiting Personnel"
- Learning Activity #22: "Supervision"

Visuals: These are intended to be shown as transparencies on an overhead projector. The purpose of these visuals is to present a visual depiction of various concepts. If a projector is not available, the visuals can be shown on a flipchart or can be reproduced as a handout. A list of visuals is provided below.

- Visual #1: "The Colonial Perspective"
- Visual #2: "The Temperance Perspective"
- Visual #3: "The Medical Perspective"
- Visual #4: "The Sociocultural Perspective"
- Visual #5: "The Distribution of Consumption Perspective"
- Visual #6: "Drug-Related Problems"
- Visual #7: "Prevention Targets"
- Visual #8: "Target Components"
- Visual #9: "Prevention Strategies"
- Visual #10: "A Conceptual Framework for Preventive Action"
- Visual #11: "Five Phases of Change"
- Visual #12: "Engaging Volunteers in Prevention"
- Visual #13: "Using the Media"
- Visual #14: "Preparing a Report"
- Visual #15: "Preparing a Verbal Presentation"
- Visual #16: "Maintaining Networks"
- Visual #17: "Mobilizing a Community"
- Visual #18: "Program Planning"
- Visual #19: "Program Management"
- Visual #20: "Supervision"
- Visual #21: "Evaluation Focus"
- Visual #22: "Case Design"
- Visual #23: "Time Series Design"
- Visual #24: "Comparison Group Design"

Films: Films on certain subjects have been incorporated into the training program. The address of the distributor is included in the relevant modules. Instructors are encouraged to screen the film in advance so that they can anticipate any questions participants might have and so will be better prepared to lead a discussion. Instructors may wish to

include a film on a particular subject area if they have seen one that they feel would enhance the content. They would then have to modify the time allocations accordingly.

Other Materials: Other materials that are required on occasion include felt pens (blackboard and chalk can be substituted), large sheets of paper, masking tape, file cards, and small coloured circles of paper (chips). Even where not indicated, the instructors should feel free to use a blackboard or flipchart to highlight certain points from a presentation or from group discussion. When using a flipchart, different coloured felt pens can be used to categorize different concepts.

Equipment: Equipment requirements include an overhead projector for visuals; a 16 mm projector and screen for films; flipcharts; tables and chairs. The Instructor Guidelines indicate exactly what materials and equipment are required.

Monographs: There are three monographs which accompany the Instructor Manual. Together these monographs comprise a comprehensive set of readings in the field of prevention. The monographs contain the following material:

Monograph 1: ESSENTIAL CONCEPTS AND STRATEGIES

- “Historical Perspectives”
- “Drug Use: An Overview”
- “Prevention”
- “Prevention Strategies”
- “Contextual Factors”
- “Prevention Issues”

Monograph 2: CHANGE AGENT SKILLS

- “The Change Process”
- “Volunteers”
- “Using the Media”
- “Presentations”
- “Networking”
- “Meetings”
- “Lobbying”
- “Community Mobilization”

Monograph 3: PROGRAM PLANNING AND IMPLEMENTATION

- “Program Planning”
- “Program Management”
- “Personnel Management”
- “Evaluation”

Instructors are expected to become thoroughly familiar with the readings in these monographs prior to the presentation of the material in the classroom. The correspondence between the Units and Monographs is as follows:

- Unit A: Monograph 1
- Unit B: Monograph 2
- Unit C: Monograph 3

In most cases, participants are expected to read the material in these monographs after it has been presented in class. If funds allow, it is strongly recommended that all participants be given a copy of these monographs. One option is to make two or three copies of these monographs available for the participants to borrow. For some modules, participants are expected to have completed the reading prior to the actual workshop. In this case, they should be given plenty of notice so that they will have adequate time to obtain and read the material. It is also important to emphasize to participants that they complete the readings in Monograph 1 prior to Day Four as it is on this day that a short quiz will be given to test their understanding of the material presented in this monograph.

Each reading in the monograph is accompanied by a self-test which participants should be encouraged to try after they complete the reading. The purpose of the self-test is to help participants identify for themselves the areas where they may require some further explanation or assistance.

Included in each reading is a selected bibliography to which participants can refer if they would like additional information on a particular subject area. Most of these references can be obtained in university and college libraries. The alcohol or drug commission or foundation also may have some of the references cited. Instructors are encouraged to make a list of where the various references might be obtained in their community. This list can be distributed to participants or used as a reference to respond to individual requests.

REPRODUCTION OF MATERIALS

The instructor is responsible for the reproduction of the following materials:

- *Handouts*: All the handouts (#1-25) are to be distributed to participants.
- *Learning Activities*: All the learning activities (#1-22) are to be distributed to participants.
- *Visuals*: Overhead transparencies must be produced from the visuals (#1-24) included in the materials section. These are not intended to be distributed to participants.
- *Evaluation*: Skills Assessment Forms, Quiz on Unit A and Program Evaluation Form are to be copied. (See Evaluation)

Training Program

The entire training program requires 12 full days to complete. Because of the flexible, modular format of the program, it is possible for jurisdictions to present one Unit or even one module at a time. The overall time requirements for each Unit are:

Unit A	4 days
Unit B	5 days
Unit C	3 days

Jurisdictions may wish to stretch out the time allocations. For example, they may want to add some content or learning activity on a particular area and choose to spend five days on Unit A alone.

Modules

Outlined below are the time requirements for each module:

UNIT A: ESSENTIAL CONCEPTS AND STRATEGIES

Module 1: Historical Perspectives	3 1/2 hours
Module 2: Drug Use: An Overview	4 1/2 hours
Module 3: Prevention	6 hours
Module 4: Prevention Strategies	7 hours
Module 5: Contextual Factors	3 hours
Module 6: Prevention Issues	4 hours
TOTAL:	28 hours

UNIT B: CHANGE AGENT SKILLS

Module 1: The Change Process	3 1/2 hours
Module 2: Volunteers	3 1/2 hours
Module 3: Using the Media	3 1/2 hours
Module 4: Presentations	5 hours 55 minutes
Module 5: Networking	4 hours 35 minutes
Module 6: Meetings	3 1/2 hours
Module 7: Lobbying	3 1/2 hours
Module 8: Community Mobilization	7 hours
TOTAL:	35 hours

UNIT C: PROGRAM PLANNING AND IMPLEMENTATION

Module 1: Program Planning	6 hours 10 minutes
Module 2: Program Management	2 hours 50 minutes
Module 3: Personnel Management	5 hours
Module 4: Evaluation	7 hours
TOTAL:	21 hours

Each section of each module has assigned to it a suggested time-frame. It cannot be emphasized enough that these are intended as guidelines only. For example, if participants do not fully understand a concept or need more time to finish properly a certain activity, more time should be allowed. The instructor would then have to reduce the amount of time allocated to other areas or may want to add some extra time in the evening.

If instructors complete a section early and are looking for content to fill the time, questions can always be asked about how the content presented might apply to individuals' own work situation. The material should be made as relevant as possible to participants' experience.

Because there are several different types of topics and formats presented in a short period of time, it is imperative that instructors be thoroughly familiar with the content and format so that each session proceeds smoothly.

INSTRUCTOR PREPARATION

The following guidelines are intended to assist the instructor prepare to teach this training program. These points can be a checklist for the instructor to ensure that he or she has made adequate arrangements for the task ahead.

1. the first and most important task is to read the Instructor Manual and the teaching materials thoroughly, and to become familiar with all the areas of knowledge and skills. He or she should have a good understanding of every aspect of the program content and should feel comfortable in relaying this material to others.
2. prior to the session, the instructor should review the content and format of the particular module(s) to be taught so that the class can be conducted smoothly and there is no need for constant "checking back" with the book.
3. the instructor should ensure that the room assigned to the program is large enough to allow for small group meetings and for meetings of dyads. That is, there should be enough space so that participants can carry on discussions and simulations without being distracted by another group. The instructor may choose to have an adjacent room for the simulations. For the purposes of large group discussion, participants should be seated comfortably in a circle or horseshoe arrangement as opposed to rows one behind the other.
4. the instructor should reserve all the equipment (overhead projector, film projector and screen, flipchart) required for a particular session well in advance of the class and should test out the equipment to ensure that it is in working order. If a film is to be shown, the film itself should also be booked well ahead of time so that it is available for that particular class. The Instructor Manual provides information as to where the specific films included in the program can be obtained.

It is strongly recommended that the instructor screen all the films which are to be used in the course. Because of rental arrangements, this may mean that the instructor can view the film only a day or two in advance of the class. Despite such a short preparation time, it is important for the instructor to be familiar with the content of the film, to anticipate any questions that students might have and to prepare some thoughts and ideas to stimulate discussion.

5. all the material required for a particular module should be prepared well in advance. In several instances, the instructor will have to do more extensive preparation. In Module 7 of Unit B on Lobbying, for example, instructors have to review the instructions carefully; determine how many participants will be assigned to the various roles; prepare colour-coded badges and the "chips" which represent strategic resources.
6. the instructor should ensure that participants have access to the references cited in the selected bibliographies in the monographs. This entails determining where these references are available and whether certain books or articles should be purchased or photocopied for participants to borrow.
7. it is the responsibility of the instructor to ensure that participants clearly understand the learning objectives of the training program as well as the purpose of the evaluation instruments that have been included.
8. the instructor must be aware of and responsive to the needs of the individual participant. In particular, the participant needs to feel: (a) accepted and liked by other participants; (b) that his or her contributions are worthwhile; (c) comfortable enough to take part actively in the learning activities and discussion; d) challenged and stimulated by the program content; (e) free to express an opinion or idea without fearing criticism.

PARTICIPANT EVALUATION

There are two major types of evaluation included in the training program. The first is an objective evaluation; it is a quiz worth 25 points and is intended to test individuals' understanding of the material contained in the first four modules. It is given on Day 4. This test is optional.

Instructors should emphasize that the primary purpose of this test is to ensure that participants understand the core material and essential concepts in the field of prevention. Individuals who do not do well on this test (fewer than 17 points) should receive individualized attention to help them grasp the concepts with which they are having difficulty.

The answers to this quiz should be presented immediately after its completion. Participants are to grade their own papers. The instructor should collect these and review them to get an idea as to whether any subject areas appear to require further clarification.

The second or subjective type of evaluation is a Skills Assessment Form. It is employed in the following module when participants are practising skills:

Unit C, Module 3: Personnel Management

The Skills Assessment Form has a short list of questions which require "yes" or "no" answers. Both the individual practising the skill and the participant observing the simulation or observing the performance are required to fill in the form right after the skill has been practised. Participants are then allowed a brief time to discuss how well they think the skill was performed.

It should be stressed that the purpose of this Form is not so much to grade participants as it is to help individuals identify where they themselves may need more assistance or practice. The instructor should collect these Forms and review them to determine whether any individual is having difficulty with a particular skill. Those individuals should receive individualized attention. For example, the instructor may help them by practising the simulation with them at a private session. The instructor also can play the role with a third party so that the participant requiring assistance can act as an observer. Those individuals who require additional instruction should receive a lot of support and reinforcement in their efforts to improve their skills.

PROGRAM EVALUATION

At the end of each Unit, participants are asked to complete a written Program Evaluation Form in which they are asked various questions about the content and format of that Unit. The instructor is expected to collect these, review them and, when possible, make adjustments to the training program. For example, instructors are not in a position to rewrite the readings contained in the monographs if participants find that these are too complicated. Instructors can use this comment, however, by taking time to review the readings with the entire group or with the individuals who may be experiencing difficulty with them.

In addition to these end-of-Unit evaluations, there are some open feedback sessions throughout the training program which allow participants to make comments and suggestions about any aspect of the program. Instructors should encourage participants to make comments and should involve them in determining what modifications can be made.

ICEBREAKER ACTIVITY

The success of a highly experiential training program such as this one is dependent largely upon the quality of group interaction. One of the ways of enhancing this group interaction is through an "icebreaker" activity at the beginning of the program.

Because of the heavy content in the first Unit of the program, only 30 minutes was allowed for icebreaker activity. Instructors may wish (and are indeed encouraged) to add more time to this activity, especially if participants have diverse backgrounds and have never met before. For example, the instructor may wish to have an evening session before the actual training program to allow participants to get to know each other.

There are a great variety of possible icebreaker activities, including self-introduction and informal mingling. A group also can split up into dyads and members are asked to hold a brief discussion with their partners about their work experience, educational background, or personal interests. After the discussion period, the members of the dyads then introduce their partners to the rest of the group.

Ideas for icebreaker activities can be found in the series by J. William Pfeiffer and John E. Jones (eds.) *A Handbook of Structured Experiences for Human Relations Training*, Volumes 1-6. This series is published in La Jolla, California, by University Associates, Incorporated.

INSTRUCTOR GUIDELINES

Module 1: Historical Perspectives

PURPOSE

The purpose of exploring historical perspectives on alcohol is to provide participants with an understanding of how definitions of and solutions to alcohol problems have evolved over the years and how these perspectives have influenced present-day thinking regarding these problems.

RATIONALE

Knowledge of the historical perspectives on alcohol helps promote our understanding of the myriad of policies and programs concerning alcohol and other drugs.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. identify the five major perspectives on alcohol;
2. state how each perspective would explain alcohol-related problems;
3. state the solution to these problems proposed by each perspective;
4. explain how present-day policies and programs on alcohol have been influenced by these perspectives.

TIME

Day One A.M. – 3 1/2 hours

MATERIALS/EQUIPMENT

“Historical Perspectives”, Monograph 1
Handout #1: “Outline of Program Content”
Handout #2: “Learning Objectives: Unit A, Module 1”
Learning Activity #1 : “Alcohol Perspectives”
Learning Activity #2 : “Alcohol Policy”
Learning Activity #2a: “Answers to ‘Alcohol Policy’”
Visual #1: “The Colonial Perspective”
Visual #2: “The Temperance Perspective”
Visual #3: “The Medical Perspective”
Visual #4: “The Sociocultural Perspective”
Visual #5: “The Distribution of Consumption Perspective”
Overhead projector

PREPARATION

Participants are expected to have read “Historical Perspectives”, Monograph 1, prior to the presentation of this material.

FOLLOW-UP ASSIGNMENT

Review “Historical Perspectives”, Monograph 1.

Day One
30 minutes

1. Icebreaker Activity

- Welcome participants and make opening remarks. Introduce yourself and briefly describe your background and work experience.
- Handle administrative matters—confirm participant list; clarify dates and times; explain how to obtain the reading materials referred to in the selected bibliography.
- As a means of acquainting participants with each other, it may be necessary to conduct some “icebreaker” activities. See discussion of Icebreaker Activity in the Introduction.

30 minutes

2. Introductory Presentation

- Explain to participants that the overall purpose of this training program on Prevention in the Drug Field is to provide them with the knowledge and skills required to develop and implement prevention programs directed toward drug-related problems and to help them develop the attitudes appropriate to carrying out this work.
- Briefly describe the content and format of the training program. Explain that the program itself is divided into three major Units, each of which deals with a unique and essential component of prevention training.
- Explain that Unit A is entitled “Essential Concepts and Strategies”. It focuses primarily on the knowledge that prevention workers require in this field. The Unit itself is divided into six major modules, each of which deals with a different core knowledge area. Unit B focuses primarily on the skills required by a change agent. These include using the media, conducting effective meetings, and making presentations and community mobilization. Unit C deals with the knowledge and skills required to plan and implement a prevention program.

Handout #1: “Outline of Program Content”

- Distribute Handout #1 which outlines the content of this training program.
- Indicate that this program is based largely on participant involvement. Participants are encouraged to ask questions and to express their ideas. In order to promote such involvement, much of the material will be taught by means of small group activities in which participants have an opportunity to explore concepts and share their views. This means that throughout the training program, the group will be divided into smaller groups and into dyads (two’s) and triads (three’s).
- Indicate that follow-up work will be assigned after each module. Participants are expected to complete these assignments as soon as possible after the material has been presented. In some cases, participants will be required to do some work in preparation for the next module.
- Explain that follow-up assignments will consist primarily of reading the material in the three monographs which accompany this training program. In addition, participants will be expected to work on their own or in groups to complete certain learning activities.
- Point out that at the end of each reading in the monographs is a self-test which participants are expected to complete on their own. These tests are intended to provide them with an indication of their comprehension of the material.
- Indicate that participants’ performance will be monitored throughout the training program. This monitoring will include an objective test as well as subjective ratings of participants’ performance. The objective test will be in the form of a quiz which will be given on the afternoon of Day 4. The quiz will be based on the material included in the first four modules of Unit A. Questions on the quiz will require short answers only. It is imperative that participants read the material in Monograph 1 immediately after it is presented in the workshop. (Note: This test is optional. See discussion on Evaluation in the Introduction to this manual.)

Instructional Plan: A.M.

Table 1

HOUR	TIME	FORMAT	MATERIALS
9:00-9:30	30 minutes	Icebreaker Activity	
9:30-10:00	30 minutes	Introductory Presentation	Handouts #1 - 2
10:00-10:30	30 minutes	Small Group Discussion on Perspectives	Learning Activity #1
10:30-10:50	20 minutes	Summary Presentation	Visuals #1 - 5 Overhead projector
10:50-11:05	15 minutes	Break	
11:05-11:35	30 minutes	Small Group Learning Activity on Perspectives	
11:35-11:50	15 minutes	Groups Share Answers	
11:50-12:30	40 minutes	Individual Learning Activity on Policy	Learning Activity #2 - 2a
12:30		Follow-up Assignment	Review "Historical Perspectives on Alcohol", Monograph 1

TOTAL 210 minutes
 (3 1/2 hours)

- Explain that participants' performance in certain skill areas also will be assessed. In two different modules, there are Skills Assessment Forms which help guide them in the performance of certain skills. These forms are to be completed by the participant who performed the skill as well as by the individual(s) who took part in the simulation or who observed the participant. These forms have several questions and require a "yes or no" answer only. The instructor will collect these forms upon the completion of the module during which they were used. The purpose of these forms is not so much to grade participants as it is to help them identify the areas in which they may require more practice or more individualized attention.
- Point out that participants, also will be asked to evaluate the training program itself. Some time has been put aside throughout the program for feedback sessions in which participants are free to make comments about any aspect of the format and content. Upon the completion of each Unit, participants, also will be asked to fill in a Program Evaluation Form which will be collected by the instructor. Where feasible, modifications can be made to the training program on the basis of participants' answers.
- Explain that the purpose of the first module in Unit A is to acquaint participants with the various perspectives that have been prevalent with respect to the use of alcohol. Five major perspectives or conceptualizations about alcohol use will be explored. These are: the colonial, temperance, medical, sociocultural, and distribution of consumption perspectives.
- Ask participants why they think it is important to have an understanding of this material.
- Point out that each of these perspectives has had a significant impact upon our thinking and has played an important role in influencing present-day policies with respect to alcohol and other drugs.

Handout #2: "Learning Objectives: Unit A, Module 1"

- Distribute Handout #2 which outlines the learning objectives for this module. Read aloud each objective.

30 minutes

3. Small Group Discussion on Perspectives

- Explain that the key concepts in the reading "Historical Perspectives", Monograph 1 will be reviewed by means of the following learning activity.

Learning Activity #1: "Alcohol Perspectives"

- Divide participants into small groups. Distribute Learning Activity #1. Explain to participants that they should discuss each question as a group. They should try to arrive at a consensus with respect to each of the answers. Answers should be brief. Inform participants that they have approximately 30 minutes to complete this learning activity.

20 minutes

4. Summary Presentation

- Briefly review the answers to these questions. (This review will also serve as a means of summarizing the material on this subject.

1. Alcohol was viewed as an important commodity during colonial times. It was used as a beverage to substitute for a contaminated water supply; as a substance with curative and preventive powers; as a source of food energy; as an important source of revenue. The key alcohol problem was considered to be public drunkenness. Drinking itself was fine; drinking in excess was unacceptable. The cause of the problem was not the alcohol but the defective moral character of those who were unable to control their drinking. Excessive indulgence in alcohol was punished through public humiliation such as spending time in the "stocks", whipping, or being chided in the church sermon.

Visual #1: "The Colonial Perspective", overhead projector

- Show Visual #1 which depicts the key theme of the colonial perspective.

2. A complex interplay of religious, moral, social, scientific, and economic forces led to the development of the temperance movement. The expansion of the domestic liquor industry saw a dramatic increase in production and consumption of alcohol. The social control which had moderated drinking practices was breaking down. There were tremendous social changes, including industrialization, massive immigration, and a movement to urban areas. These changes were uprooting traditional values and threatening to lead to social chaos. Excessive drinking came to be seen not as a result of individual weakness but as a result of environmental disequilibrium. Scientific findings were exploding widely-held myths about the positive health effects of alcohol. The new industrialism required workers who were absolutely sober to ensure the safe and efficient use of automated machinery and equipment.

3. Supporters of temperance viewed alcohol as the primary cause of vice, crime, and family breakdown. The idea of temperate or moderate drinking first advocated by the temperance movement gradually changed to one of total abstinence and then to complete legal prohibition of the manufacture and sale of alcoholic beverages.

Visual #2: "The Temperance Perspective", overhead projector

- Show Visual #2 which depicts the key theme of the temperance perspective.

4. While Prohibition did curb drinking to a certain extent, it did not succeed in totally preventing alcohol-related problems. Prohibition began to be questioned as a solution. At the same time, cosmopolitan thinking was beginning to emerge in which the "liberated individual" was a key concept. Such "liberation" involved the enjoyment of life's pleasures. Alcohol was included in these pleasures. A "rational" solution to the alcohol question was being sought.

5. Because most people are able to drink with few problems, an explanation was sought for why a minority drinks too heavily. The problem drinker was seen to lack some key attribute or capacity that the majority possessed. Problem drinkers or alcoholics experienced a powerlessness or loss of control over alcohol. Loss of control was due to individual weakness which had its source in some biological or psychological disorder that made those persons different from others.

Visual #3: "The Medical Perspective", overhead projector

- Show Visual #3 which depicts the theme of the medical perspective.

6. Advocates of the sociocultural perspective felt that the medical model did not place sufficient emphasis on the role played by cultural factors in the etiology of alcohol-related problems. Neither had any of the other perspectives taken into consideration factors such as norms, societal ambivalence, and cultural attitudes toward alcohol.

Visual #4: "The Sociocultural Perspective", overhead projector

- Show Visual #4 which depicts the theme of the sociocultural perspective.

7. The sociocultural perspective proposes the integration of alcohol in daily life situations in order to reduce its "forbidden fruit" quality. This would, in turn, help reduce the problem use of alcohol. Integration can take place, for example, by encouraging the use of alcohol with meals and by lowering the legal minimum drinking age.

8. The distribution of consumption perspective is based upon studies of the statistical distribution of consumption within a population. The major concept put forth is that the level of alcohol consumption within a population is positively related to the prevalence of alcohol problems found within that population. The solution proposed by advocates of the distribution of consumption perspective is to reduce the overall consumption of alcohol within a population by restricting the availability of this substance. Availability can be restricted through the use of control measures such as increasing prices and taxes; limiting the hours of sale; raising the minimum legal age for drinking; reducing the number of outlets which sell alcohol.

Visual #5: "The Distribution of Consumption Perspective", overhead projector

- Show Visual #5 which depicts the theme of the distribution of consumption perspective.

15 minutes

BREAK

30 minutes

6. Small Group Learning Activity on Perspectives

- Explain to participants that they will now have an opportunity to examine these perspectives from a practical viewpoint.
- Divide participants into five small groups and designate each group to represent one of the five major perspectives on alcohol-related problems. Indicate that each group is to act as a body of elected municipal officials. The group is to identify a solution to the following problem from the perspective they represent. Point out that participants need not worry about the real powers of municipal versus provincial/federal officials. They can undertake any action they deem appropriate.

Every Friday afternoon a group of the “boys” from the office “hit” the local pub for a few drinks. By the time they are ready to leave, several hours and many beers later, they are usually fairly rowdy. They often disturb passersby on the street. Local merchants with stores beside the pub are infuriated because customers now stay away from the area on Friday nights to avoid possible trouble. Last week, while driving home from the pub, one of the “boys” who was visibly intoxicated just barely missed hitting a young girl who was riding her bicycle on the street. The community is outraged and is demanding that local politicians take immediate action. What is to be done?

15 minutes

7. Groups Share Answers

- Allow groups approximately 3 minutes to share their answers on this scenario.
- Summarize the discussion:
 - The colonial perspective would call for humiliation of the individuals involved through some form of public punishment. In this day and age, whipping and flogging would obviously be out of the question. Some other form of humiliation “marking” these individuals would be appropriate. An example might be a front-page headline story about the “local drunk—a would-be killer!” Stiff fines also might be imposed upon them all.
 - A municipal council with a temperance bias might call for a referendum of its constituents on local option which would prohibit the sale of alcoholic beverages in all establishments within the jurisdiction of that government.
 - A group of elected officials influenced by the thinking of the medical model might demand immediate treatment for the drunk driver.
 - Politicians favoring the sociocultural perspective may call for a community education program to inform the public about appropriate and hazardous uses of alcohol. Elected officials also may consider sponsoring a program in the local community which would encourage the responsible use of alcohol (prescriptive norms). Such a program may include guidelines on how many drinks are acceptable for a “TGIF” celebration. Penalties for impaired driving might be increased (proscriptive norms). Another proscriptive norm to promote might be bartenders’ responsibility not to serve alcohol to intoxicated persons.
 - Elected municipal officials supporting the distribution of consumption perspective would define the incident as a community problem. They would likely enforce a number of measures to control the availability of alcohol in that community. Such measures might include limiting the hours that taverns, lounges, and bars might remain open; requiring that food be served in conjunction with all alcoholic beverages; restricting the number of drinks which could be purchased by one customer within a particular period of time; limiting the amount of time that a customer could legally spend in a licensed establishment; prohibiting bartenders from selling liquor to an intoxicated customer.

40 minutes

8. Individual Learning Activity on Policy

- Indicate that participants will now be asked to complete an activity on their own which helps demonstrate the links between the various perspectives on alcohol and present-day policies and programs.

Learning Activity #2: "Alcohol Policy"

- Distribute Learning Activity #2. Ask participants to complete this chart to the best of their ability using the material presented earlier. Explain that in this Learning Activity, "Causes of Alcohol Problems" refers to the way in which particular perspectives have defined the nature of the problem. "Solutions" are the methods which have been proposed in order to deal with the problem. "Policy Implications" means what type of general policies would be proposed by each perspective. In "Present-day Examples", participants are asked to think of any program or piece of legislation of which they are aware that would be linked to each particular perspective. Indicate that participants have approximately 40 minutes to complete this learning activity. (The instructor may wish to complete the first column with the group as a whole to illustrate how the chart should be completed).

Learning Activity #2a: "Answers to 'Alcohol Policy'"

Distribute Learning Activity #2a and review this material.

- Inquire as to whether there are any questions about the material presented in this module.

9. Follow-Up Assignment

Monograph 1

- Review "Historical Perspectives", Monograph 1.

Module 2: Drug Use: An Overview

PURPOSE

The purpose of this module is to acquaint participants with various aspects of drug use: trends, problems, causes and correlates.

RATIONALE

Knowledge of trends helps clarify why prevention is important. This information can be used as evidence if prevention workers need to seek funds, resources, or other supports. An understanding of problems, causes, and correlates will help prevention workers determine in a systematic way the factors toward which they should direct their prevention efforts within any given community.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. name several ways in which the use of drugs has spread;
2. identify at least five major categories of drug-related problems and provide an example of each type;
3. identify the three major types of theory attempting to explain drug use and provide example of each type;
4. provide at least three examples of factors that are positively correlated with drug use and at least three examples of factors that are negatively correlated with drug use.

TIME

Day One P.M. – 3 1/2 hours

Day Two A.M. – 1 hour

TOTAL – 4 1/2 hours

MATERIALS/EQUIPMENT

“Drug Use: An Overview”, Monograph 1
Handout #3: “Learning Objectives: Unit A, Module 2”
Handout #4: “Correlates of Drug Use”
Learning Activity #3 : “Drug-Related Problems”
Learning Activity #3a: “Sample Completed Worksheet”
Learning Activity #4 : “Correlates of Drug Use”
Visual #6: “Drug-Related Problems”
Overhead projector
Flipchart
Felt pen

FOLLOW-UP ASSIGNMENT

Read “Drug Use: An Overview”, Monograph 1.

30 minutes

1. Small Group Discussion on Trends in the Drug Field

- Explain to participants that the purpose of Module 2 is to explore various aspects of drug use, including trends, problems, causes and correlates.

Handout #3 “Learning Objectives: Unit A, Module 2”

- Distribute Handout #3 which outlines the learning objectives of this module. Read aloud each objective.
- Indicate that the subject of trends in the drug field will now be discussed.
- Ask participants why they think it is important to understand trends in the drug field. Explain that such an understanding provides some answers as to why prevention is important. Such information can be used as evidence if prevention workers try to obtain support or resources for their efforts. Second, an understanding of societal trends may influence the prevention effort. For example, there is growing public concern about the problem of impaired driving. It may be timely for prevention workers to direct their attention to this problem. The “pump may already be primed” in certain communities; that is, there may be a significant amount of support for preventive action in that area. Indeed, if public concern is great enough, an alcohol and drug commission may receive government instruction to concentrate on that particular problem.
- Divide participants into small groups. Ask them to discuss what, in their opinion, are the major trends with respect to drug use in their community (or in the country as a whole). In addition, what drug-related issues appear to be receiving a lot of media coverage?
- Allow groups approximately 45 minutes for this discussion.

“Drug Use: An Overview”, Monograph 1

- Ask selected participants for their ideas. Summarize the discussion by presenting the material on pages 18 to 25 of “Drug Use: An Overview”, Monograph 1.
- Inquire as to how participants might determine what the local trends and issues are in their own communities. Explain that there are several ways to do this including analyzing media reports; holding interviews with relevant persons such as social service agency directors; reviewing data including changes in admissions to hospitals for alcohol and drug-related problems, increases in arrests for impaired driving, caseloads of alcohol counselling centres, changes in numbers of licensed outlets in the community, extensions in hours of sale of alcohol, and increases in numbers of establishments offering a “happy hour”.

45 minutes

2. Individual Learning Activity on Drug-Related Problems

- Explain that participants will be asked to identify what the problem(s) might be in the following learning activity and what the possible causes might be.

“Drug Use: An Overview”, Monograph 1

- Present the material on pages 28 to 33 of “Drug Use: An Overview”, Monograph 1 about the six major categories of drug-related problems.

Visual #6 “Drug-Related Problems”, overhead projector

- Show Visual #6 which outlines the six major types of drug-related problems.

Learning Activity #3 “Drug-Related Problems”, flipchart, felt pen

- Distribute Learning Activity #3 which describes 8 different situations involving problems related to drug use. On a flipchart, make a chart with two columns and the headings “Type of Problem” and “Possible Causes”. Instruct participants to read each situation and to fill in the first column only. In this column, they are to indicate whether the problem is primarily of a physical or mental health nature. Is the physical

Instructional Plan: P.M.

Table 2

HOUR	TIME	FORMAT	MATERIALS
1:30-2:30	60 minutes	Small Group Discussion on Trends in the Drug Field	Handout #3 Monograph 1
2:30-3:15	45 minutes	Individual Learning Activity on Drug- Related Problems	Monograph 1 Visual #6 Overhead projector Learning Activity #3 Flip chart Felt pen
3:15-3:30	15 minutes	Break	
3:30-4:30	60 minutes	Individual Learning Activity on Causes	Learning Activity #3-3a Flip chart Felt pen
4:30-5:00	30 minutes	Presentation on Causes	Monograph 1
5:00		Follow-up Assignment	Read "Drug Use: An Overview"

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: A.M.

Table 3

HOUR	TIME	FORMAT	MATERIALS
9:00-9:20	20 minutes	Presentation on Correlates	
9:20-10:00	40 minutes	Individual Learning Activity on Correlates	Learning Activity #4 Handout #4
10:00-12:30	150 minutes	Module 3	

TOTAL 210 minutes
 (3 1/2 hours)

health problem acute or chronic? Is the individual's or group's social functioning adversely affected by the use of drugs? Is the problem a behavioural one—that of poor conduct? Does the situation involve an accident or casualty?

- Indicate that participants have approximately 25 minutes to complete this part of the learning activity.
- Lead a discussion (approximately 15 minutes) about the answers to this learning activity. Jot down participants' answers on the flipchart.

15. minutes

3. BREAK

60 minutes

4. Individual Learning Activity on Causes

Learning Activity #3: "Drug-Related Problems"

- Indicate that participants will now be asked to complete the next part of Learning Activity #3. Explain that participants are to complete the second column entitled "Possible Causes" by listing at least three possible causes of the situation. Explain that there is no "right" answer. Rather, the purpose of this learning activity is to explore the wide range of possible causes. Inform participants that they have approximately 40 minutes to complete this part of Learning Activity #3.

Flipchart, felt pen

- In the remaining time, fill in the second column on the flipchart by asking participants to name the three possible causes they had indicated on Learning Activity #3. See Learning Activity #3a which provides examples of possible answers.

Learning Activity #3a: "Sample Completed Worksheet"

5. Presentation on Causes

30 Minutes

"Drug Use: An Overview", Monograph 1

- Present the material on pages 25 to 27 of "Drug Use: An Overview", Monograph 1 about the possible causes of drug-related problems.
- Inquire as to whether there are any questions about the material presented in this module.

6. Follow-Up Assignment

"Drug Use: An Overview", Monograph 1

- Read "Drug Use: An Overview", Monograph 1.

20 minutes

1. Presentation on Correlates

- Welcome participants. Explain that the first hour of the morning session will be spent completing Module 2. A review of the material presented in yesterday's workshop will be followed by a discussion of the correlates of drug use.
- Briefly summarize the key points presented in the reading "Drug Use: An Overview", Monograph 1.
 1. The use of drugs appears to be spreading as indicated by, for example, trends toward younger people using drugs and toward polydrug use.

2. There are six major types of drug-related problems: chronic illness or condition, acute health problems, mental health problems, problems of demeanour, casualties, and major social roles.
3. Three major types of theory have been put forward to explain drug use: physiological, psychological, and social theories.
 - Introduce the concept of correlates by explaining that research on drug use has found that relationships exist between certain factors and the use of drugs. The relationship is not necessarily causal. In other words, no empirical research exists which definitively establishes that the presence of one particular factor causes a certain behaviour—in this case, drug use. Rather, a correlation tells us whether or not a particular factor and drug use have been found to occur frequently together.
 - Indicate that both positive and negative correlates of drug use have been found. Ask participants whether they can explain these terms. Explain that a positive correlation indicates that drug use does tend to occur in the presence of certain specified variables. A negative correlation would indicate that drug use tends not to occur in the presence of other specified variables.
 - Ask participants why they think it would be important to understand the concept of correlates.
 - Explain that research on correlates focuses our attention on the possible factors that may promote the use of substances. Information on correlates may provide clues as to where to begin to look in trying to determine the causes of a particular problem.

40 minutes

2. Individual Learning Activity on Correlates

Learning Activity #4: "Correlates of Drug Use"

- Distribute Learning Activity #4. Indicate that participants should draw upon their knowledge and experience in the drug field to help them complete this learning activity. They are to try to identify at least five factors that they think might be positively correlated with the use of drugs and at least five factors that they think would be negatively correlated with the use of drugs. These factors may relate to the personality characteristics of the individual user, to the family, to the peer group, to the school, or to the community.
- Allow participants approximately 30 minutes to complete this learning activity.

Handout #4: "Correlates of Drug Use"

- After participants have completed the learning activity, distribute Handout #4 which summarizes the results of recent research on correlates. Read aloud the material in this Handout.

3. Begin Module 3.

Instructional Plan: A.M.

Table 4

HOUR	TIME	FORMAT	MATERIALS
9:00-10:00	60 minutes	Completion of Module 2	
10:00-11:00	60 minutes	Small Group Discussion on Prevention	Handout #5 Several large sheets of paper Masking tape Felt pens
11:00-11:15	15 minutes	Break	
11:15-12:00	45 minutes	Film on Prevention	Film 16 mm projector Screen
12:00-12:30	30 minutes	Feedback Session	

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: P.M.

Table 5

HOUR	TIME	FORMAT	MATERIALS
1:30-2:45	75 minutes	Small Group Learning Activity on Developing Prevention Plans	Learning Activity #5 Flip charts Felt pens
2:45-3:15	30 minutes	Groups Present Plans	
3:15-3:30	15 minutes	Break	
3:30-5:00	90 minutes	Presentation on Prevention Targets and Strategies	Monograph 1 Flip chart Felt pen Visuals # 7 - 10 Overhead projector
5:00		Follow-up Assignment	Monograph 1

TOTAL 210 minutes
 (3 1/2 hours)

Module 3: Prevention

PURPOSE

The purpose of this module is to acquaint participants with the concept of prevention.

RATIONALE

It is essential for any individual working in the field of prevention to have a basic understanding of what is meant by "prevention".

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. provide at least five examples of preventive action that may be taken in the course of everyday living;
2. state the three major targets of preventive action;
3. identify at least three components of each of these targets;
4. name and define the four major types of prevention strategies in the drug field;
5. identify which strategy(ies) would have to be employed in order to change each of the three major targets.

TIME

Day Two A.M. – 2 1/2 hours

Day Two P.M. – 3 1/2 hours

TOTAL 6 hours

MATERIALS/EQUIPMENT

"Prevention", Monograph 1
Handout #5: "Learning Objectives: Unit A, Module 3"
Learning Activity #5: "Memorandum to Honorary Ministers"
Visual #7: "Prevention Targets"
Visual #8: "Target Components"
Visual #9: "Prevention Strategies"
Visual #10: "A Conceptual Framework for Preventive Action"
Overhead projector
Several large sheets of paper
Masking tape
Felt pens
Film: "The Mountain"¹
16 mm projector
Screen
Flipchart or blackboard

FOLLOW-UP ASSIGNMENT

Read "Prevention", Monograph 1.

60 minutes

1. Completion of module 2.

60 minutes

¹ available from: Kinetic Film Enterprises – 416-469-4155
781 Gerrard Street
Toronto, Ontario
M4M 1Y5

2. Small Group Discussion on Prevention

- Explain to participants that the remainder of the morning and the entire afternoon will be spent discussing the concept of prevention.

Handout #5: "Learning Objectives: Unit A, Module 3"

- Distribute Handout #5 which outlines the learning objectives of this module. Read aloud each objective.
- Indicate that before discussing prevention in the drug field, participants will first be asked to think about the concept of prevention in general.

Several large sheets of paper

Masking tape, felt pens

- Divide participants into small groups. Each group should have a few large sheets of paper (these can be taped to the wall) and a felt pen. Participants should be asked to identify at least 10 daily life situations which can be considered to be preventive in nature.

Examples are:

- Having a fire extinguisher installed on the wall beside the stove;
- Wearing a life jacket on a boat;
- Immunizing children against certain diseases.
- Allow approximately 45 minutes for this discussion.
- Post all the lists side by side and read aloud the examples proposed by each group.
- Ask participants what they think is meant by the expression "a gram of prevention is worth a kilogram of cure"? In their opinion, is the message true?
- Indicate that this theme will be more fully developed in the film to be shown after the break.

15 minutes

3. BREAK

45 minutes

4. Film on Prevention

- Explain to participants that "The Mountain" is an animated film about prevention. As they are watching the film, they should keep in mind the following questions (these can be jotted down on a flipchart or blackboard):
 - What are the key messages of this film?
 - How are the solutions proposed by the townspeople related to the perspectives on alcohol discussed in Module 1?
 - Does the film make a good case for "a gram of prevention being worth a kilogram of cure"?

Film "The Mountain", 16 mm projector, screen

- Show the film "The Mountain".
- Lead a discussion asking for participants' reactions to the film, particularly in relation to the questions outlined above.
- Summarize the discussion by pointing out the following:

- The first solution to the problem of individuals falling off the mountain was to fence in the mountain, thereby restricting access to it. This approach is similar to that taken by the proponents of temperance who supported restrictions on availability and ultimately total prohibition. As in the case of the “Great Prohibition Experiment”, individuals found ways to get around the mountain. They had to do so surreptitiously; they would “sneak around” and would even remove parts of the fence. Violations became so common that there was hardly any fence left standing at all. The restriction did not effectively reduce the accident rate on the mountain.
- The next solution was to set up first-aid stations to assist those who had been injured in a climb. While this treatment was helpful to those particular individuals, it did nothing to help curb the rate of accidents or to stop others from incurring similar injuries. Such an approach is reminiscent of the medical model of alcohol which proposes that treatment be provided for those afflicted by alcoholism. This is an “after the fact” approach which waits until the victims have been “afflicted”. The treatment model focuses little attention on preventing individuals from harming themselves in the first place.
- A third approach was to teach schoolchildren about the dangers of the mountain by means of scare tactics. This approach is similar to the early days of drug education in the 1960’s. In order to combat the tremendous increase in drug usage, it was believed that a fear of drugs had to be instilled in children and youth. It was felt that such fear would discourage drug use.
- The final solution to the mountain “problem” was a combination of actions. Because the townspeople realized that the mountain would not go away, they decided to instruct people about how to climb the mountain safely. Individuals were taught about responsible mountain-climbing techniques, including self-care (e.g. be well rested before a climb) and safety on the mountain itself (one particular side of the mountain is more dangerous than others and should therefore be avoided). In addition, activities which would meet individuals’ need for relaxation, diversion, and excitement were highlighted so as to divert attention from the mountain as the only form of leisure activity available. Once the mountain had ceased to be the major focus of attention, it no longer represented such a major problem to that community.
- In general, the film supports the view that “a gram of prevention is worth a kilogram of cure”. It demonstrates that carefully thought-out and well-planned actions to intervene in any problematic situation before it occurs will have tremendous benefit in reducing the incidence (new cases) of problems and the corresponding rate of damage.

30 minutes

5. Feedback Session

- Point out that, as mentioned in Module 1, time would be set aside throughout the training program for participants to ask any questions they may have about the material presented to date. In addition, this time is to be used to provide them with an opportunity to make suggestions about the content and format of the training program. For example, they may wish to see the pace reduced or increased. They may need more time for small group discussion. They may want to discuss in more detail the readings in the monographs.
- The instructor should try to determine whether particular requests made by individuals are representative of the feelings of the entire (or majority of the) group. If so, a discussion should be held concerning if and how these suggestions might be incorporated into the training program.

LUNCH

75 minutes

1. Small Group Learning Activity on Developing Prevention Plans.

- Explain to participants that the afternoon session will focus on the prevention of drug-related problems. Point out that a small group learning activity on prevention will be followed by a lecture about the key concepts in this field, in particular the targets and strategies of prevention.
- Divide participants into three small groups. Designate one member of the group to be the Honorary Minister for the Prevention of Drug-Related Problems. That individual is to receive the Memorandum to Honorary Ministers as well as a copy of the Memorandum to Deputy Ministers (see Learning Activity #5).

Instructors should fill in the names of these individuals and the dates on the learning activity. The other members of the group are to be appointed as Deputy Honorary Ministers who will assist the Honorary Minister. They are to receive the Memorandum to Deputy Ministers as well as a copy of the letter received by the Honorary Minister. The Minister and Deputies are expected to develop a provincial/territorial plan for preventing drug-related problems. They have access to unlimited resources, expertise and funds. The plan should include a wide range of proposals regarding preventive action.

- Point out that this is really a brainstorming exercise to allow participants to think as freely and as broadly as they can about prevention. There are no “right or wrong” answers to this exercise and they can be as creative as they like. It has been left “wide open” deliberately to encourage participants to be as creative as possible.

Learning Activity #5: “Memorandum to Honorary Ministers”, flipcharts, felt pens

- Distribute Learning Activity #5. Read aloud the instructions included in the “Memorandum to Honorary Ministers” and the “Memorandum to Deputy Ministers”. Indicate that groups should write down their ideas on a flipchart.
- Allow groups approximately 75 minutes to develop their plan.

30 minutes

2. Groups Present Plans

- Allow each group approximately 10 minutes to present their plans to the other groups. Members of the other groups should be encouraged to ask questions and make comments about these presentations. Instructors may wish to set up as well a 3-person panel from the “Premier’s Office”. The panel would then ask questions about the prevention plan.

15 minutes

3. BREAK

90 minutes

4. Presentation on Prevention Targets and Strategies

- Indicate that the remainder of the session will focus upon prevention targets and strategies.
- Ask participants what is meant by a prevention “target” and a prevention “strategy”.
- Explain that “target” refers to the individual or thing that is to be changed or influenced in order to prevent the occurrence of a drug-related problem or to minimize its impact if it does occur. “Strategy” refers to the type of action that must be taken to prevent the occurrence of a drug-related problem or to minimize its impact if it does, in fact, occur.

Flipchart, felt pen

- Draw two columns on a flipchart entitled “Target” and “Strategy”. Ask participants to refer to the small group learning activity they just completed. Ask selected participants to identify the target(s) of the preventive effort discussed by their group. Beside each target should be indicated the prevention strategy that would have been employed.

“Prevention”, Monograph 1

- Present the material on pages 37 and 38 of “Prevention”, Monograph 1 about the targets of preventive action.

Visual #7: “Prevention Targets”

- Show Visuals #7 and 8 which depict the targets of preventive action.

Visual #8: "Target Components", overhead projector

"Prevention", Monograph 1

- Present the material on pages 39 to 41 of "Prevention", Monograph 1 about prevention strategies.

Visual #9: "Prevention Strategies", overhead projector

- Show Visual #9 which depicts the four major prevention strategies.

"Prevention Strategies", Monograph 1

- Present the material on pages 41 and 42 of "Prevention", Monograph 1 about the development of a conceptual framework for preventive action.

Visual #10: "A Conceptual Framework for Preventive Action", overhead projector

- Show Visual #10 which depicts this conceptual framework.
- Inquire as to whether participants have any questions about this material.
- Ask participants to examine Visual #10 and to try to identify what pieces of information can be derived from this framework. Ask them to try to identify as well some of the limitations of this framework.

"Prevention", Monograph 1

- Present the material on page 42 of "Prevention", Monograph 1 about the strengths and limitations of the framework.

5. Follow-up Assignment

"Prevention", Monograph 1

- Read "Prevention", Monograph 1. Ask participants to try to identify examples of prevention programs of which they are aware or in which they have been involved. Any supporting documentation also may be brought in on Day 3.

Module 4: Prevention Strategies

PURPOSE

The purpose of this module is to provide participants with an understanding of the four major prevention strategies: influence, control, competence development, and environmental design.

RATIONALE

The four major types of prevention strategies represent the actual activities in which prevention workers will be engaged. The strategies are essentially the “nuts and bolts” of prevention work. Participants must have a clear understanding of the types of action possible within each strategy. The specific efforts which are under way in this country and elsewhere will provide them with examples and guidelines for their own activity. It is also important that prevention workers be aware of the strengths and weaknesses of each approach. Finally, they must be clear about the limitations of their own roles when employing particular strategies.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. describe the four major prevention strategies;
2. provide examples of programs or efforts at present taking place within each of these strategies;
3. identify the possible targets of each strategy;
4. describe some of the weaknesses or potential problems inherent in each strategy.

TIME

Day Three A.M. – 3 1/2 hours

Day Three P.M. – 3 1/2 hours

TOTAL – 7 hours

MATERIAL/EQUIPMENT

“The Influence Strategy”, Monograph 1
“The Control Strategy”, Monograph 1
“The Competence Development Strategy”, Monograph 1
“The Environmental Design Strategy”, Monograph 1
Handout #6: “Learning Objectives: Unit A, Module 4”
Handout #7: “Ads on Alcohol”
Learning Activity #6: “Reasons for Drinking”
Learning Activity #7: “Skit on ‘Booze’”
Learning Activity #8: “Employing Controls”
Learning Activity #9: “Barriers to Communication”
Learning Activity #10: “Pumpkin’s Problem”
Learning Activity #11: “Environmental Design”
Visual #10: “A Conceptual Framework for Preventive Action”
Overhead projector
Flipchart
Felt pen

Instructional Plan: A.M.

Table 6

HOUR	TIME	FORMAT	MATERIALS
9:00-9:30	30 minutes	General Discussion on Prevention Programs	Handout #6
9:30-10:00	30 minutes	Presentation on the Influence Strategy	Monograph 1
10:00-10:30	30 minutes	Small Group Learning Activity on Drug Education	Learning Activity #6
10:30-11:00	30 minutes	Small Group Learning Activity on Drug Education	Learning Activity #7
11:00-11:15	15 minutes	Break	
11:15-11:45	30 minutes	Large Group Discussion on Persuasion Programs	Handout #7
11:45-12:15	30 minutes	Presentation on the Control Strategy	
12:15-12:30	15 minutes	Individual Learning Activity on Controls	Learning Activity #8

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: P.M.

Table 7

HOUR	TIME	FORMAT	MATERIALS
1:30-1:50	20 minutes	Individual Learning Activity on Controls (cont.)	Learning Activity #8 Flip chart Felt pen
1:50-2:20	30 minutes	Presentation on the Competence Development Strategy	Monograph 1
2:20-2:50	30 minutes	Individual Learning Activity on Communication	Learning Activity #9
2:50-3:20	30 minutes	Small Group Discussion on Pumpkin's Problem	Learning Activity #10
3:20-3:35	15 minutes	Break	
3:35-4:05	30 minutes	Presentation on the Environmental Design Strategy	Monograph 1
4:05-4:40	35 minutes	Small Group Learning Activity on Environmental Design	Learning Activity #11
4:40-5:00	20 minutes	Summary Presentation	Monograph 1
		Follow-up Assignment	Monograph 1

TOTAL 210 minutes
 (3 1/2 hours)

FOLLOW-UP ASSIGNMENT

Participants are to read the following four papers in Monograph 1:

- “The Influence Strategy”
- “The Control Strategy”
- “The Competence Development Strategy”
- “The Environmental Design Strategy”

30 minutes

1. General Discussion on Prevention Programs

- Explain to participants that the purpose of this module is to provide them with an understanding of the four major prevention strategies.

Handout #6: “Learning Objectives: Unit A, Module 4”

- Distribute Handout #6 which outlines the learning objectives for this module. Read aloud each objective.

Visual #10: “A Conceptual Framework for Preventive Action”, overhead projector

- Indicate that participants will first have an opportunity to share with the group any information they have been able to obtain regarding prevention programs. Before the discussion, show Visual #10 which depicts the targets and strategies of preventive action. Allow participants approximately 25 minutes to share with the group any information they may have about prevention efforts taking place in their own or another jurisdiction.

30 minutes

“The Influence Strategy”, Monograph 1

2. Presentation on the Influence Strategy

- Present the material in the reading “The Influence Strategy”, Monograph 1.

30 minutes

3. Small Group Learning Activity on Drug Education

- Point out that participants will be asked to complete learning activities from an actual drug education program so that they can experience on a first-hand basis various methods of presenting information about drugs. They also will consider one specific media campaign. General aspects of the influence strategy will then be reviewed.
- Explain that the learning activity participants will be asked to complete is adopted from a drug education program developed by the Addiction Research Foundation of Ontario in conjunction with the Halton Board of Education. This learning activity is intended for Grade 6 students. The overall objective of these exercises is to help students understand the short-term effects of alcohol.
- Divide participants into small groups and ask each group to choose a recorder.

Learning Activity #6: “Reasons for Drinking”

- Distribute Learning Activity #6. Participants are to read the poem on this learning activity and to identify as a group the reasons for drinking. They can fill these in on the lines provided below the poem. In addition, the group is to arrive at a consensus as to whether each reason they provide is a myth or the truth. They are to indicate their answer by placing an “x” under the appropriate column. Allow approximately 30 minutes for completion of this learning activity.

30 minutes

4. Small Group Learning Activity on Drug Education

- Indicate that participants will remain in small groups for this learning activity. The composition of the groups should be varied so that different participants can work with each other.
- Explain that this play is one of a series of plays that has been used by the northern regional office of the Addiction Research Foundation of Ontario. The plays are acted out before public school students after which a discussion is held concerning what students feel they have learned. The purpose of acting this out here is to consider how effective drama techniques might be in providing information about drugs.

Learning Activity #7: "Skit on 'Booze'"

- Distribute to three members of each group Learning Activity #7 which is a copy of the skit "Booze". Those three individuals are to play the roles of Jill, Sally and Tom. They are to read aloud the content of the skit to the other group members. After the skit is read, participants are to discuss the effectiveness of this method of presenting information about drugs. Do they think that students will learn anything about the effects of alcohol? Is this a more interesting means of presenting material than a lecture? What are the weaknesses of dramatic approaches? Are participants aware of any other drug education programs involving the use of drama? Allow approximately 25 minutes for this discussion.
- Ask participants for their comments about both of the above learning activities as instructional methods. Explain that these learning activities are samples chosen from a vast range of possible programs. There are many variations on the way in which information on drugs can be presented and organized. Stress that participants who may become involved in developing drug education programs in the future should examine programs which have already been prepared so as to obtain ideas with respect to various methods of presenting information in an effective manner.

15 minutes

4. BREAK

30 minutes

Handout #7: "Ads on Alcohol"

5. Large Group Discussion on Persuasion Programs

- Point out that the influence strategy is also comprised of a persuasion component. Indicate that a discussion will be held about an actual persuasion campaign. Distribute Handout #7 which contains copies of several print ads published in newspapers and magazines by the Seagram Corporation. The entire group should be asked to share their ideas with respect to these ads using the following questions as guidelines.
 - Who would be the potential target(s) of this ad?
 - Are these ads visually attractive?
 - Are the messages behaviourally oriented, that is, do they clearly articulate the behavioural changes that individuals should adopt?
 - How effective do you think these might be in reducing the incidence of alcohol-related problems?

30 minutes

"The Control Strategy", Monograph 1

7. Presentation on the Control Strategy

- Indicate that the second prevention strategy to be considered is that of control. Present the material in the reading "The Control Strategy", Monograph 1.

15 minutes

Learning Activity #8: "Employing Controls"

8. Individual Learning Activity on Controls

- Explain to participants that they will now be asked to complete a learning activity on possible control actions that could be undertaken in a particular community. Distribute Learning Activity #8. Instruct participants to read the covering letter. On the second page, they are to identify at least six specific measures that can be taken to reduce the availability of alcohol. In addition, they are to indicate the potential sources of resistance to these actions. Allow participants approximately 25 minutes (15 minutes before lunch) to complete this learning activity. Before participants begin, point out that in the “real world”, it is unlikely that such an opportunity would arise so easily. Prevention workers and interested parties would likely have to do a lot of lobbying before politicians might consider changing the present control structure. Indicate that participants will have an additional 10 minutes after lunch to complete this learning activity.

LUNCH

20 minutes

Learning Activity #8: “Employing Controls”

Flipchart

Felt pen

1. Individual Learning Activity on Controls (continued)

- Allow participants an additional 10 minutes to complete the learning activity.
- Ask selected participants to identify the proposals that they intend to present to the provincial Member of Parliament. Write down these answers on a flipchart. Possible answers might include the following: limiting the hours of sale in on-premise outlets; closing retail outlets at an earlier hour; closing retail outlets on certain days; raising the legal minimum age for drinking; limiting the numbers of alcoholic beverages which may be served in restaurants; reducing the number of retail outlets (liquor stores).

30 minutes

“The Competence Development Strategy”, Monograph 1

2. Presentation on the Competence Development Strategy

- Indicate that the third major prevention strategy “Competence Development” will now be considered. Present the material in the reading “The Competence Development Strategy”, Monograph 1.

30 minutes

3. Individual Learning Activity on Communication

- Explain that participants will now have an opportunity to take part in some actual competence development programs that have been written and implemented in Canada. (Instructors are free to select their own examples of competence development programs if they wish).
- Point out that the first learning activity is taken from a competence development program entitled “Kids and Drugs”. The primary purpose of the “Kids and Drugs” program is to encourage participants to explore family circumstances that may lead to harmful involvement with drugs.

Learning Activity #9: “Barriers to Communication”

- Distribute Learning Activity #9. Divide participants into small groups. Ask to consider each of the barriers to communication listed on the left-hand side of the chart. Then ask them to talk about ways in which these barriers might be overcome.
- Indicate that small groups have approximately 20 minutes for this discussion.

30 minutes

4. Small Group Discussion on “Pumpkin’s Problem”

- The second learning activity in this series is taken from the Hole in the Fence program which was developed by Health and Welfare Canada. It is intended for elementary school students. The purpose of the program is to present a number of themes of relevance to children by means of an illustrated storybook about vegetable people. The stories are then used as a springboard for classroom discussion.
- Explain that participants will have an opportunity to discuss one of the stories included in this program.

Learning Activity #10: “Pumpkin’s Problem”

- Divide participants into small groups. Distribute Learning Activity #10 which contains the story entitled “Pumpkin’s Problem”. Ask one participant in each group to read the story aloud. Participants should then discuss the questions attached to the story. Allow approximately 20 minutes for completion of this learning activity.

15 minutes

5. BREAK

30 minutes

6. Presentation on the Environmental Design Strategy

- Indicate that the final prevention strategy “Environmental Design” will now be considered.

“The Environmental Design Strategy”, Monograph 1

- Present the material in the reading “The Environmental Design Strategy”, Monograph 1.

35 minutes

Learning Activity #11: “Environmental Design”

7. Small Group Learning Activity on Environmental Design

- Explain that participants will now consider possible environmental design programs. Divide participants into small groups. Distribute Learning Activity #11.
- Explain to groups that all members are to consider their own workplaces, neighbourhoods, and the educational institutions from which they graduated. For each environment, they are to identify at least two major changes in policies or programs which could be implemented in order to improve the quality of that environment or to reduce the stresses within that environment. These changes would have to be reasonable and possible. For example, proposing a reduction in the working day from seven to three hours would obviously not be feasible.
- Allow participants approximately 35 minutes to complete this learning activity.

20 minutes

8. Summary Presentation

- Summarize the key points about each of these strategies.

Influence:

1. The influence strategy is one of the most widely employed forms of preventive activity in the drug field. The strategy includes a variety of activities ranging from the provision of information to more structured efforts which attempt to modify attitudes in a certain direction and to change specific behaviours. By means of improving knowledge and changing attitudes, information programs also have the potential of influencing individuals’ intentions to use particular (or all) drugs.

2. Two major components of the influence strategy are education and persuasion programs. Education programs have been implemented largely in school settings. Influence programs, on the other hand, generally employ print and electronic media to convey their messages.
3. While influence programs have been directed primarily toward the users or potential users of drugs, it is also possible to focus influence activities upon selected components of the environment, in particular, upon the advertising/promotion component, the sociocultural context, and key influencers.
4. The objectives of drug education are often unclear. For example, is the purpose to promote responsible drug use or to encourage abstinence? The lack of clear objectives makes it almost impossible to conduct an effective evaluation. The first important principle in employing the influence strategy is to establish a clear statement of what the program hopes to achieve.
5. Despite the varied goals of existing programs, they are all essentially communication activities. The four key elements of communication programs are: source, message, channel, and receiver variables. Source variables refer to the characteristics of the presenter(s) of the information. Message variables refer to the style of communication employed. Channel variables refer to the means of transmission of the message. Finally, receiver variables are the characteristics of the audience. All these factors must be taken into consideration when developing an influence program.
6. Influence approaches can be combined with other prevention strategies such as control and competence development in order to reduce drug-related problems.

Control:

1. The control strategy consists of those actions which result in the enactment, modification, or enforcement of legislation or regulations in order to alter a particular substance, its availability, or the demand for that substance. The control strategy as preventive action involves intervening in the legislative structures which govern how accessible drugs are, their quality, and the conditions under which they may be obtained or used.
2. The Narcotic Control Act and the Food and Drugs Act and their regulations constitute the basis of drug control legislation in Canada. These are federal pieces of legislation. In addition, through the Excise Act, the federal government regulates the manufacture and importation of beverage alcohol by issuing licences to distillers, brewers and importers.
3. Another important piece of the legislative framework at the federal level is the Criminal Code which defines as criminal behaviour the following acts: driving while impaired, driving with a blood alcohol content level of .08% or more, and refusing to submit to a breathalyzer test.
4. Provincial legislation governs the regulation and sale of alcoholic liquors. Provincial acts establish liquor boards which are empowered to control and manage all liquor stores and the conditions under which beverage alcohol is sold on off-premises (retail outlets) and on-premises. Offences and penalties are also outlined under these Provincial acts.
5. Most efforts attempting to modify this framework have been in the area of manipulating the availability of alcohol. There are several reasons for this, including the fact that legal restrictions on access to alcohol have had an impact on consumption by heavy drinkers. A wide range of factors can be altered including price, density of outlets, hours of sale, minimum age of use, home production quotas, alcoholic content of beverages, size of beverage containers, restrictions to certain categories of persons, and frequency of outlets. The factors which comprise the physical and social context within which alcohol is purchased or consumed can also be manipulated. For example, the advertising of alcoholic beverages can be restricted; requirements can be placed upon taverns to serve food with all alcoholic beverages.
6. Because tighter restrictions on alcohol availability are not politically popular, recommendations for increased control usually call for a public awareness program to inform the public as to the purpose of these measures and to gain their support. This is an example of how the control strategy can be combined with the influence strategy to improve the effectiveness of the control measures. The control strategy can also be combined with the competence development and environmental design strategies to achieve certain goals.

Competence Development:

1. Competence development is a prevention strategy intended primarily to improve the skills of individuals or the skills of key influencers who are part of individuals' relevant environments. Competence development may focus primarily upon modifying skills or may be directed toward enhancing individuals' self-confidence and self-esteem.
2. This prevention strategy is based on the assumption that individuals with low self-esteem and poor self-concept are more likely than others to engage in the use of substances to meet their psychological needs or to help them interact more effectively on a social basis.
3. In addition to focusing on the potential users of drugs, competence development activities can be directed toward key influencers. Parents are particularly important targets because of the key role they play in molding their children's self-concept. There are several factors necessary for psychological well-being, including a sense of self-worth, caring relationships, and a clear identity.
4. Competence development programs are diverse and include programs focused on developing or enhancing skills in a variety of areas, including mastery of physical tasks, decision-making and parenting.
5. Despite the wide variety of competence development programs that at present exist, there are relatively few evaluations of such programs. Those that have been conducted have shown mixed results.
6. One of the ways of improving the effectiveness of competence development programs is to combine them with other prevention approaches. For example, a competence development program which focuses on enhancing students' abilities to make decisions might be combined with an environmental design approach which allows for increased student participation in the formulation of school policies.
7. The role of prevention workers vis-à-vis competence development programs is to lead such programs or to act as facilitators. Facilitation involves helping to establish the program; obtain support for it; organize orientation sessions; provide assistance and information on an ongoing basis; inform community members about the effort; develop and implement a plan for program evaluation.

Environmental Design:

1. The term "environmental design" has been chosen as an umbrella concept which includes a range of possible activities. These activities are directed toward the environments within which individuals spend most of their time outside the home, the school, the workplace, and the community.
2. Environmental design can be defined as activities that attempt: (a) to improve the environments within which individuals spend their time or (b) to reduce the stress in those environments. In some instances, the focus is drug-specific. That is, an action may be undertaken for the express purpose of reducing individuals' use of alcohol or drugs or of providing alternative activities so that a range of interesting and stimulating leisure opportunities are made available. In other instances, the focus of the preventive effort is more general, that is, to modify particular environments so as to ameliorate all aspects of individuals' lives. It is believed that an improvement of environment will enhance mental health and thereby reduce individuals' need to engage in the use of substances.
3. Environmental design programs in the schools have focused upon procedures such as the way in which decisions are taken and policies are developed. Possible changes include involving students in the selection of issues for study and modifying methods of grading.
4. Workplace modifications have included the introduction of participative decision-making, flex-time, and job enrichment. Such modifications are often complex and can have tremendous repercussions throughout the organization. It is therefore essential to ensure that all relevant parties are included in the effort. The interests of workers should be protected by ensuring their involvement in this process.
5. Environmental design in the community refers primarily to efforts to establish new programs or procedures in geographical neighbourhoods. One major community effort to combat the problem of drug abuse has been the development of the alternatives approach. "Alternatives" is a generic term which encompasses a wide range of activities. These may involve developing procedures for promoting participation in important com-

munity decisions. Such actions also include the establishment of programs which are believed to provide substitutes for drug-induced experiences. It is important, however, that such alternatives be relevant to individuals' needs and that they not be simply considered as "empty time" fillers.

6. The role of prevention workers in the environmental design strategy is to act as a catalyst and facilitator. Prevention workers would be responsible for bringing together the relevant parties to help them define their needs; to provide them with relevant information on resources; to assist them in the implementation of any procedures or programs which may be developed by concerned parties.

- Inquire as to whether there are any questions about the material presented in this module.

"The Influence Strategy"

"The Control Strategy"

"The Competence Development Strategy"

"The Environmental Design Strategy", Monograph 1

9. Follow-Up Assignment

- Instruct participants to read "The Influence Strategy", "The Control Strategy", "The Competence Development Strategy", and "The Environmental Design Strategy" in Monograph 1.

Module 5: Contextual Factors

PURPOSE

The purpose of this module is to provide participants with an understanding of key contextual factors and with an ability to assess the environment within which they will be developing preventive programs. The three contextual factors that will be considered in this module are: organizational systems, the political process, and socioeconomic conditions.

RATIONALE

An understanding of contextual factors is important because these factors can have a significant effect upon the preventive effort, how it is developed and implemented; whether it is likely to encounter resistance; whether it obtains the support it requires.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. explain why it is important for prevention workers to have an understanding of contextual factors;
2. name at least six key areas which help explain the functioning of organizational systems;
3. describe how prevention workers might find out about how political decisions are made in any government department;
4. explain how socioeconomic conditions within the local community, within the jurisdiction, and within the country as a whole might have an impact upon the preventive effort.

TIME

Day Four A.M. – 3 hours

MATERIALS/EQUIPMENT

“Contextual Factors”, Monograph 1
Handout #8: “Learning Objectives: Unit A, Module 5”
Learning Activity #12: “Organizational Characteristics”

INSTRUCTOR PREPARATION

In preparation for section #5 of this module, instructors should become familiar with the role that the various provincial departments play in the alcohol field. Instructors should also obtain a copy of the Liquor Control Act for their jurisdiction.

15 minutes

1. Large Group Discussion on Organizations

- Explain to participants that the purpose of this module is to provide them with an understanding of key contextual factors and with an ability to assess the situation within which they will be developing preventive programs. The three key contextual factors that will be considered in this module are: organizational systems, the political process, and socioeconomic conditions.

Handout #8: “Learning Objectives: Unit A, Module 5”

- Distribute Handout #8 which outlines the learning objectives for this module. Read aloud each objective.
- Ask participants why they think it would be important to have an understanding of organizational systems. Explain that when prevention workers enter a new system for the purpose of establishing a preventive effort, they must “get their bearings”. They have to learn how the organization is set up and where they fit

Instructional Plan: A.M.

Table 8

HOUR	TIME	FORMAT	MATERIALS
9:00-9:15	15 minutes	Large Group Discussion on Organizations	Handout #8
9:15-10:05	50 minutes	Learning Activity on Organizations (Dyads)	
10:05-10:35	30 minutes	Individual Learning Activity on Organizations	Learning Activity #12
10:35-10:50	15 minutes	Break	
10:50-11:45	55 minutes	Large Group Discussion on the Political Process	
11:45-12:00	15 minutes	Presentation on Socioeconomic Conditions; Summary	
12:00-12:30	30 minutes	Begin Module 6	

TOTAL 210 minutes
 (3 1/2 hours)

in within that framework. They must find out what the present organizational policies and procedures are as well as how these are made. They have to know how communication flows in the organization through both formal and informal channels. In fact, there are 10 major areas with which prevention workers must acquaint themselves in any organization. These are presented in the reading "Contextual Factors", Monograph 1.

50 minutes

2. Learning Activity on Organizations (Dyads)

- Instruct participants to split up into dyads. They are to consider themselves a prevention team that has just been asked to establish a preventive program. Each dyad is to be "assigned" to a different organization such as a school, a large private corporation employing over 500 persons, a government department, a neighbourhood activity centre (such as the YMCA). If desired, the instructor can allow participants to draw names of organizations from a hat.
- Instruct dyads to consider the following two questions: What information about this organization do you think would be important to have in order to develop a preventive effort in this setting? What are some of the ways that the two of you might go about finding out this information? Participants should feel free to consider all possibilities. Point out that participants will be asked to share their ideas with others upon completion of this exercise. Allow approximately 25 minutes for dyads to discuss the two questions about organizations: what information they, as prevention workers, would need and how they would go about obtaining it.
- Ask participants to select one member of the dyad to present its deliberations to the other group members. Allow each dyad approximately three minutes for this sharing.

30 minutes

Learning Activity #12: "Organizational Characteristics"

3. Individual Learning Activity on Organizations

- Indicate that participants will now have an opportunity to examine the relevant characteristics of their own work organization (or former place of employment). Distribute Learning Activity #12. Instruct participants to read each of the questions on this sheet and to answer them in point form to the best of their ability. There are no right or wrong answers. Point out that if participants are not sure of a particular answer, they can fill in "don't know". If they do this, however, they are required to spend some time thinking about the question and to jot down a brief statement as to how they might go about finding out this information. Allow participants approximately 30 minutes to complete this learning activity.

15 minutes

4. BREAK

55 minutes

5. Large Group Discussion on the Political Process

- Indicate that the political process is the second aspect of context of which prevention workers should be aware. It is important for prevention workers to understand the political process because certain aspects of prevention work require direct intervention in this process. This is particularly true in the case of the control strategy which involves actions that result in the enactment, modification, or enforcement of legislation, regulations, or policies. If, for example, prevention workers wished to focus their efforts upon raising the minimum drinking age, they must enter into the political arena. Similarly, advocating harsher penalties for impaired driving and stricter enforcement of these penalties requires political action. Other types of activity involving the political process include attempting to reduce the frequency of liquor outlets; improving the enforcement of the trafficking of narcotic drugs; restricting the hours of sale in alcohol retail outlets.

- Lead a group discussion around the following questions: (Instructors may have to do some preparation for the answers as these will vary from jurisdiction to jurisdiction.)
- What major federal government departments are involved in the alcohol and drug field? (e.g. Health and Welfare Canada, Transport Canada, Revenue Canada, Department of Justice, Statistics Canada)
- What provincial government departments formulate policy with respect to alcohol and/or drugs? State briefly the role each plays in this field (e.g. health, social welfare, justice, transportation, revenue, education).
- What are the powers of the liquor board within your jurisdiction? (See the relevant provincial Liquor Control Act.)
- What are some of the municipal bodies which are involved in the formulation of policy in the drug field? (school boards, police, parks and recreation departments.)
- Indicate that these are bodies that may have to be approached at some point by prevention workers who become involved in the political field. As part of the group discussion, ask participants to consider the following question: “It is obvious that each of these bodies would differ greatly with respect to how it makes decisions and responds to public pressure. If you had no idea how to approach a particular government department, say a provincial Ministry of Human Resources, how would you go about doing this? Where would you start in terms of finding out how to affect the decision-making process in this organization?”
- Point out that there are a number of possibilities including:
 - reading the annual reports and other documents published by that department;
 - consulting with the director of the local social planning council;
 - holding discussions with supervisors and colleagues who have had previous experience with this department;
 - contacting an inside departmental source;
 - meeting with an individual or officer whose role is to act as a liaison with the public;
 - determining whether there are any internal committees consisting of staff or politicians who make recommendations to the department;
 - finding out whether there are any external citizens’ committees or organizations which monitor the activities of that department and advocate policy changes.

15 minutes

6. Presentation on Socioeconomic Conditions; Summary

- Explain that the third major contextual factor to be considered are socioeconomic conditions. Ask participants why it would be important to be aware of these conditions.

“Contextual Factors”, Monograph 1

- Present the material on pages 79 and 80 of “Contextual Factors”, Monograph 1 about the potential impact of socioeconomic conditions upon a preventive effort.
- Summarize the key points presented in this module and in the reading “Contextual Factors”, Monograph 1.
 1. There are 10 major areas which help explain the functioning of any organization: history and origins; tasks; social structure; social process; management of boundaries; organizational culture; technology; allocation and utilization of resources; effectiveness and efficiency; demographic characteristics.
 2. In attempting to understand the political processes in any jurisdiction, it is first necessary to determine what the inputs to the political process might be. There are a number of ways to do this, including speaking

to organizational officials, talking informally to people outside the system, and reviewing organizational documents.

3. Prevention workers should have an understanding of how socioeconomic conditions might affect the preventive effort. The local economy may be closely tied to the alcohol industry. Efforts to reduce the availability of alcohol may encounter resistance. Poor economic conditions may contribute to drug problems in a particular community. Finally, poor socioeconomic conditions may severely restrict the resources allocated to the prevention effort.

- Inquire as to whether there are any questions about the material presented in this module.

7. Begin Module 6.

Module 6: Prevention Issues

PURPOSE

The purpose of this module is to explore some of the issues of relevance to the prevention field. These issues are: ethics, dilemmas, attitudes and mandate.

RATIONALE

Prevention workers must be aware of some of the problems inherent in the field (ethical questions, dilemmas) in order to understand more fully the potential constraints upon their work and the possible difficulties they may encounter. At the same time, however, they should be aware of some of the factors which would help them carry out their work more effectively. These would include holding certain attitudes and clearly understanding their mandate in the field of prevention.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. describe at least two major ethical considerations in the field of prevention;
2. identify at least two dilemmas that they may face in their work;
3. define what is meant by the term "counter-prevention";
4. state what attitudes toward substances, toward people, and toward work are helpful in this field;
5. articulate their own mandate in the field of prevention.

TIME

Day Four A.M. – 1/2 hour

Day Four P.M. – 3 1/2 hours

TOTAL 4 hours

MATERIALS/EQUIPMENT

"Prevention Issues", Monograph 1
Handout #9: "Learning Objectives: Unit A, Module 6"
Learning Activity #13 : "Alcoholism Questionnaire"
Learning Activity #13a: "Scoring the 'Alcoholism Questionnaire'"
Learning Activity #14 : "Mandate"
Flipchart
Felt pen
Program Evaluation Form
Quiz on Unit A

FOLLOW-UP ASSIGNMENT

Read "Contextual Factors" and "Prevention Issues", Monograph 1.

30 minutes

1. Discussion of Ethics (Dyads)

- Explain to participants that the final module in this Unit will consider four major issues related to the field of prevention. These are: ethics, dilemmas, attitudes and mandate.

Handout #9: "Learning Objectives: Unit A, Module 6"

- Distribute Handout #9 which outlines the learning objectives for this module. Read aloud each objective.

Instructional Plan: A.M.

Table 9

HOUR	TIME	FORMAT	MATERIALS
9:00-12:00	180 minutes	See Module 5	
12:00-12:30	30 minutes	Discussion of Ethics	Handout #9

TOTAL 210 minutes
(3 1/2 hours)

Instructional Plan: P.M.

Table 10

HOUR	TIME	FORMAT	MATERIALS
1:30-1:55	25 minutes	Large Group Discussion on Dilemmas	
1:55-2:45	50 minutes	Individual Learning Activity on Attitudes	Learning Activity #13 - 13a Flip chart Felt pen
2:45-3:00	15 minutes	Break	
3:00-3:15	15 minutes	Individual Learning Activity on Mandate	Learning Activity #14
3:15-3:30	15 minutes	Summary Presentation	Monograph 1
3:30		Follow-up Assignment	Monograph 1
3:30-4:00	30 minutes	Feedback Session	Program Evaluation Form
4:00-5:00	60 minutes	Quiz on Unit A	Quiz

TOTAL 210 minutes
 (3 1/2 hours)

- Indicate that participants will have time to consider only one prevention-related issue, that of ethics, before the lunch break. The term “ethics” refers to the “rightness” or “wrongness” of certain actions. One of the ethical issues in the field of prevention is the question of the right of prevention workers to modify individuals’ behaviour when these persons have exhibited no problem in the area of drug use. Competence development programs, in particular, set out to improve individuals’ skills in living in a variety of areas, including communications, decision-making and problem-solving. Should a government spend public funds on improving people’s behaviour?
- Divide the group into dyads. Ask participants to discuss the statement: “Prevention workers have a right to try to improve individuals’ behaviour”. Participants should think of the arguments that would support this statement and the arguments against it.
- Allow participants approximately 25 minutes for this discussion.

“Prevention Issues”, Monograph 1.

- Point out that other ethical issues are discussed in the reading “Prevention Issues”, Monograph 1.

LUNCH

25 minutes

2. Large Group Discussion on Dilemmas

- Point out that a second set of issues relevant to prevention are the dilemmas inherent in this field.
- Ask participants if they are able to identify any of these dilemmas and whether they have, in fact, encountered any dilemmas in their own work, either in prevention or in treatment. If so, how were they able to resolve them? If participants are unable to identify any dilemmas, instructors might ask some questions to encourage responses. Some suggestions are: Have you ever been asked to justify why resources should be spent on prevention when there is such a pressing need for treatment and rehabilitation services? Have you ever attempted to evaluate a prevention effort? Was this a difficult process? Have you encountered any problems? Have your prevention efforts ever been opposed by an individual, group or organization? At what stage of the prevention effort did you encounter this resistance? What was the rationale for their opposition? How was it manifested?

20 minutes

3. Individual Learning Activity on Attitudes

- Explain that the third major issue of importance to the prevention field are the attitudes of prevention workers. Attitudes are our affinities toward and aversions to situations, persons or objects. Awareness of prevention workers’ attitudes is important. Negative attitudes toward the people whom workers are supposedly helping would likely interfere with their work.

40 minutes

- Point out that the purpose of the following learning activity is to help participants clarify their attitudes toward alcohol in particular. They are to work on their own to complete a questionnaire which was developed by the Addiction Research Foundation of Ontario. This questionnaire was developed after a study of opinions about alcoholism was conducted. Nine “areas of opinion” about alcohol were identified. These areas of opinion will be discussed after participants complete the questionnaire.

Learning Activity #13: “Alcoholism Questionnaire”²

- Distribute Learning Activity #13. Explain that participants are to read each question and to indicate beside each their degree of agreement or disagreement with the statement on a scale of 1 to 7. The scale of 1 to 7 can be interpreted in the following way:

² Marcus, Alan M. The Alcoholism Questionnaire: Administration, Scoring and Interpretation. Toronto, Addiction Research Foundation of Ontario.

1. Completely disagree
2. Mostly disagree
3. Disagree more than agree
4. Neutral
5. Agree more than disagree
6. Mostly agree
7. Completely agree

Flipchart
Felt pen

- Jot this scale down on a flipchart and leave it there throughout the duration of the exercise. Participants are to mark an “x” in the box which designates their opinion. Allow approximately 20 minutes for completion of this questionnaire.
- Explain that the scoring will be completed as a group. Indicate that certain questions can be clustered into factors which are indicative of the way individuals feel about certain aspects of alcohol use.

Learning Activity #13a: “Scoring the ‘Alcoholism Questionnaire’”

- Distribute Learning Activity #13a which explains the scoring for the alcoholism questionnaire. Direct participants to Factor #1: “Emotional Difficulties as Causes of Alcoholism”. Questions #7, 19, 28 and 36 on the questionnaire pertain to this factor. Ask participants to add up the scores that they assigned to these four questions (7, 19, 28 and 36). They should then divide this score by four to obtain their average score for Factor #1.
- Explain that if a participant obtained a high score on this Factor, this would indicate that he or she believes that emotional difficulties or psychological problems are important contributing factors in the development of alcoholism. Conversely, a low score would indicate that the participant does not believe that emotional difficulties or psychological problems contribute significantly to the development of alcoholism.
- Proceed to Factor #2 “Loss of Control”. Explain that questions 6, 16, 27 and 32 on the questionnaire can be grouped together to indicate participants’ beliefs with respect to loss of control. Ask participants to add up the scores that they have assigned to those four questions and to divide by four to obtain the average score. Explain that a high score indicates a belief that alcoholics are unable to control their drinking behaviour. Conversely, a low score would imply that the individual believes that alcoholics are indeed able to control their drinking behaviour.
- Continue in this manner until all nine factors have been discussed. If time remains, instructors should lead a discussion about the results of the questionnaire and whether participants were surprised about the findings or about their own attitudes about alcohol.

15 minutes

4. BREAK

15 minutes

5. Individual Learning Activity on Mandate

- Point out that the final issue to consider is that of mandate. Explain that it is absolutely essential that prevention workers be clear about the boundaries of their mandate – the roles and responsibilities it allows as well as the limitations it imposes.

Learning Activity #14: “Mandate”

- Indicate that participants can work on their own to complete the following activity. Distribute Learning Activity #14 which contains a series of questions about participants’ mandate in the field of prevention. Participants are to answer these questions to the best of their ability. Individuals who are not involved in

prevention at the present time can speculate as to what they think their employing organization would allow them to do in the field of prevention. If necessary, participants can answer “don’t know” to some of the questions. If, however, they put “don’t know” as an answer, they should indicate in point form how they would find out the answer to this question in their real work situation. For example, they might consult with their supervisor, request clarification from the board of directors, review job description, or check policy manuals. Allow participants approximately 15 minutes to complete this learning activity.

15 minutes

“Prevention Issues”, Monograph 1

6. Summary Presentation

- Briefly present the key points in the reading “Prevention Issues”, Monograph 1.
 1. There are several ethical questions that arise in the field of prevention, including prevention workers’ right to modify behaviour and the equity implications of certain preventive actions. While there are no right or wrong answers to these questions, prevention workers should nevertheless be aware of the ethical considerations in the field.
 2. There are also several dilemmas that prevention workers may face, including difficulties in evaluation and use of scarce resources to counteract problems that have not yet occurred. One of the most serious dilemmas is counter-preventive action that may be taken in opposition to the preventive effort. Such action is usually taken when individuals, groups or organizations feel threatened in some way by the preventive effort. The best way to deal with potential counter-preventive action is to try to anticipate it and be prepared to counter it or at least to minimize its impact.
 3. Certain attitudes are helpful in the field of prevention. These include a non-judgmental attitude toward individuals who use drugs; a willingness to listen to the opinions of others and to involve them in the preventive action; a realistic and flexible attitude with respect to what is possible to accomplish in the field of prevention.
 4. Finally, a clear understanding both of personal and organizational mandate is essential for all prevention workers. Mandate may impose certain limitations of which they must be aware. In some cases, it may be necessary to seek a change in mandate.
- Inquire so to whether there are any questions about the material presented in this module.

7. Follow-Up Assignment

“Contextual Factors”; “Prevention Issues”, Monograph 1

- Instruct participants to read “Contextual Factors” and “Prevention Issues”, Monograph 1.

30 minutes

8. Feedback Session

- Indicate to participants that they will now have an opportunity to provide feedback about the training program.

Program Evaluation Form

- Distribute the Program Evaluation Form. Allow participants approximately 15 minutes to complete this evaluation.
- In the remaining time, ask participants for their comments and suggestions regarding any modifications to the training program.

60 minutes

9. Quiz on Unit A.

- Explain to participants that they will be asked to complete a quiz which tests their knowledge about the material contained in Unit A. Answers are to be in point form or short sentence only. Participants will have 40 minutes to complete the quiz. The remaining 20 minutes should be spent reviewing the answers.

Module 1: The Change Process**PURPOSE**

The purpose of this module is to acquaint participants with the change process. A second purpose is to present the variety of roles that change agents may assume as well as the dilemmas inherent in working as a change agent.

RATIONALE

By its very nature, prevention is a change-oriented process. A preventive effort may seek to change individuals and/or drugs and/or environments. Because change is inherent in prevention, it is important for workers in this field to understand how change takes place and how it can be facilitated. An outline of the dimensions of the change agent may help prevention workers understand the variety of roles that they may have to assume in any change effort. Problems can be avoided if workers are aware in advance of the dilemmas inherent in their work.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. explain what is meant by "change";
2. describe the five phases of change presented in the Lippitt model of change;
3. identify at least five roles that a change agent might assume;
4. describe at least two dilemmas that change agents may face and how these might be resolved.

TIME

Day Five A.M. – 3 1/2 hours

MATERIALS/EQUIPMENT

"The Change Process", Monograph 2
 Handout #10: "Learning Objectives: Unit B, Module 1"
 Handout #11: "Using the Five-Phase Model"
 Learning Activity #15: "Change Agent Roles"
 Visual #11: "Five Phases of Change"
 Overhead projector
 15 sheets of large paper
 3 felt pens
 Masking tape

FOLLOW-UP ASSIGNMENT

Read "The Change Process", Monograph 2.

15 minutes

1. Introductory Presentation on Change

- Welcome participants. Explain that the purpose of this module is to acquaint them with the change process. The purpose is also to present the variety of roles that change agents may assume as well as the dilemmas inherent in working as a change agent.

Handout #10: "Learning Objectives: Unit B, Module 1"

- Distribute Handout #10 which outlines the learning objectives for this module. Read aloud each objective.
- Ask participants why they think it is important for prevention workers to understand change.

- Explain that prevention is a change-oriented process. A prevention effort seeks to change one or more of the major target areas: individuals, drugs, environments. As such, change is inherent in prevention.
- Point out that change agents can assume a variety of roles. It is important to understand the range of activities that the change agent may carry out vis-à-vis a particular target: it is then possible to select those roles that are most appropriate to the situation. There are also a number of problems that may arise when trying to change an individual or a system. If prevention workers understand these dilemmas, they may be able to deal with them before they become counter-productive to the preventive effort.

20 minutes

2. Presentation on Change

- Explain that a wide range of theories about change are presented in the literature. During this session, participants will be asked to consider one particular model in depth. This model has been chosen for study because it is prescriptive. That is, it specifies what should be done by change agents who are about to become involved in a change relationship.

Visual #11: "Five Phases of Change", overhead projector

- Show Visual #11 which outlines the five major phases of the change process proposed by this model of change. Explain each phase (see "The Change Process", Monograph 2).
- Indicate that participants will now have an opportunity to apply this model of change to a case situation.

60 minutes

15 large sheets of paper

3 felt pens, masking tape

3. Small Group Learning Activity on Change

- Divide participants into three small groups. Five large sheets of paper should be taped onto the wall beside each group. The heading on each sheet should correspond to each of the five phases of the change process outlined in Visual #11. Explain that each group will be discussing a different preventive effort. Group members are to develop plans for how they intend to engage in this preventive effort and then withdraw from it. Under each of the five major phases, they should be able to identify at least five specific actions that may be taken during this phase of the change process. Participants should be encouraged to brainstorm; they should feel free to consider all possibilities. A recorder should be chosen from each group who should write down the ideas as these are raised by group members.
- Before groups begin this discussion, provide an example of how this exercise might be completed. Say, for example, that prevention workers have been asked by their employing organization to establish an alternatives program in a particular neighbourhood. The possible actions to be taken during each phase of the change process might look like those presented in Handout #11. Distribute Handout #11 and read each point aloud.

Handout #11: "Using the Five-Phase Model"

- Indicate that group #1 will be considering the steps involved in establishing a parenting program in one designated community. The second group will be working on how an alcohol education program might be implemented within a particular work setting. Group #3 will focus on the steps to be taken when trying to modify the procedures within a certain school in order to involve students in decision-making regarding rules and regulations.
- Allow participants approximately 30 minutes to complete this learning activity.
- Ask the recorder from each group to present the actions identified by that group. Allow approximately 10 minutes for each presentation; this time should include a discussion by all participants as to any points that might have been left out.

Instructional Plan: A.M.

Table 11

HOUR	TIME	FORMAT	MATERIALS
9:00-9:15	15 minutes	Introductory Presentation on Change	Handout #10
9:15-9:35	20 minutes	Presentation on Change	Monograph 2 Visual #11 Overhead projector
9:35-10:35	60 minutes	Small group Learning Activity on Change	15 Sheets of paper Felt pens Masking tape Handout #11
10:35-10:50	15 minutes	Break	
10:50-11:40	50 minutes	Individual Learning Activity on Change Agent Roles	Learning Activity #15 Monograph 2
11:40-12:20	40 minutes	Small Group Discussion on Dilemmas	
12:20-12:30	10 minutes	Summary Presentation	
12:30		Follow-up Assignment	Monograph 2

TOTAL 210 minutes
(3 1/2 hours)

- Explain that in an actual work situation, it may not be necessary to undertake all these actions. The purpose of this activity was to show how a preventive effort might be plotted out in advance. Prevention workers can then determine which actions would be necessary, which have already been accomplished, and what still needs to be achieved. In short, this five-phase model provides a helpful planning guide.

4. BREAK

50 minutes

5. Individual Learning Activity on Change Agent Roles

- Explain that participants will now be asked to consider the roles that change agents may be expected to assume. Point out that the literature has identified a range of roles appropriate for the change agent. This does not necessarily mean that in any preventive effort, prevention workers will have to undertake all of these roles. Rather, the range presented here provides them with possibilities which are then selected depending upon the nature of the project and the requirements of the situation.

Learning Activity #15: "Change Agent Roles"

- Distribute Learning Activity #15 which contains a list of the change agent roles that have been identified in the literature on this subject. Participants are to complete this activity on an individual basis. Beside each role, they should try to provide an example illustrating what the term might mean. For example, in the previous situations, the prevention worker who was attempting to establish an alternatives program acted as a guide by helping the adolescents consider the options proposed and determine what type of activity they wished to see established in the community. As an expert, the prevention worker could have provided information about setting up a no-drugs policy or about publicizing the program. As an implementer, the prevention worker helped turn the general desire to have a Saturday night coffee house into an actual program. Indicate that participants can select their example from any of the four situations previously discussed.

"The Change Process", Monograph 2

- Review the "general" answers by presenting the material on pages 5 and 6 of "The Change Process", Monograph 2.
- Ensure that participants clearly understand the meaning of the term "social therapist" as it is presented in the literature on change. If it becomes evident that an individual is really seeking counselling, prevention workers should refer this person to the appropriate helping resource.
- Participants should also be made aware of the importance of their roles as researchers. This entails documenting new approaches and sharing this information with colleagues in seminars or through papers submitted to journals. Prevention workers themselves should make an effort to keep abreast of major developments in the field. They should actively seek out new information and research that is recorded in books and journals to determine how these findings may help them in their present efforts.

40 minutes

6. Small Group Discussion on Dilemmas

- Explain that the final aspect of change to be considered in this module are the dilemmas inherent in the role of the change agent.
- Point out that dilemmas can arise in a number of areas.
- Change agents may be so anxious to see an effort succeed that they inadvertently "take over". For example, they may chair all the meetings, make all the decisions, write all the policies, and prepare the publicity materials without the assistance or involvement of relevant others.
- There may be a discrepancy between the mandate of the change agent and the objectives democratically chosen by the group. In the case of prevention, a group may wish to lobby the provincial government to

raise the minimum drinking age. The mandate of the prevention worker may be strictly in the area of educational work. Another possibility is that the employing organization may feel that the action is too political and may threaten its funding.

- Yet another type of dilemma may arise with respect to the means employed to achieve a particular end. In the prevention field, in particular, workers may be faced with a dilemma when they lobby for changes that would restrict the availability of alcohol. Members of the community may have already made it clear that they would strongly oppose such action.
- Divide participants into three small groups. Assign one dilemma to each group. Members of the group should try to identify several actions.
- Allow participants approximately 20 minutes for this discussion.
- Ask each group to share its answers.
- Review the possibilities.
- In the first instance, prevention workers might demonstrate or provide guidelines as to how meetings should be conducted, how posters should be made, or how policies are developed. After having presented the guidelines, they can gradually step back as others take on more active roles.
- In the second situation, prevention workers might try to convince the board of directors to change their stance on this issue. Or, workers may try to help the group redefine its objectives. The former may also turn the effort over to another sponsoring organization. Finally, they could help the group “spin off” on its own as an independent body.
- The dilemma with respect to “means” in the example given could have been resolved by providing information to the public as to why the action to be taken is necessary. This involves building in an influence component within the control strategy.

10 minutes

7. Summary Presentation

- Summarize the major points presented in this module:
 1. Change can be defined in an endless variety of ways. In general, it refers to modifications that take place within people, relationships and societies.
 2. A variety of models have been formulated to describe the general process of change. One particular model of change which has been widely employed in the planning process is the model developed by Lippitt et al. Its popularity is due to the fact that it is prescriptive. That is, it sets out the steps to be followed by change agents in plotting the course of change in any system. The model identifies five major phases of change: developing a need for change; establishing a change relationship; working toward change; generalizing and stabilizing the change; terminating the relationship.
 3. The literature discusses the wide range of roles that change agents may play. These roles include: guides, enablers, experts, social therapists, catalysts (expeditors), implementers, researchers, brokers, advocates and activists. The role(s) that prevention workers ultimately assume is(are) determined by the preventive effort and the action that the situation requires.
 4. Finally, the change process impinges upon human rights and human values in many ways. Dilemmas and ethical considerations may arise with respect to the extent of prevention workers' involvement in the effort; the goals of the effort; the means used to achieve an objective.
- Inquire as to whether there are any questions about the material presented in this module.

“The Change Process”, Monograph 2

8. Follow-Up Assignment

Read “The Change Process”, Monograph 2.

Module 2: Volunteers

PURPOSE

The purpose of this module is to provide participants with an understanding of how volunteers can contribute to a preventive effort.

RATIONALE

Prevention efforts in the drug field usually operate on limited budgets with few staff resources. Involving volunteers is one way of "stretching" these limited resources. Volunteer contributions also represent community support of the effort. Finally, volunteers can help facilitate entry to a community, organization, or system which would not otherwise have been readily accessible to the prevention worker.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. describe at least three possible roles a volunteer might assume in a prevention effort;
2. identify the major components of a job description;
3. provide several examples of recruitment methods;
4. describe the purpose and content of the placement interview;
5. identify the major areas of content that should be included in an orientation session.

TIME

Day Five P.M. – 3 1/2 hours

MATERIALS/EQUIPMENT

"Volunteers", Monograph 2
Handout #12: "Learning Objectives: Unit B, Module 2"
Learning Activity #16: "Volunteer Job Description"
Visual #12: "Engaging Volunteers in Prevention"
Overhead projector
5 large sheets of paper
5 felt pens
Masking tape

FOLLOW-UP ASSIGNMENT

Read "Volunteers", Monograph 2

In preparation for Day Six, review:

- "The Influence Strategy", Monograph 1
- "The Control Strategy", Monograph 1
- "The Competence Development Strategy", Monograph 1
- "The Environmental Design Strategy", Monograph 1

20 minutes

1. Introductory Presentation on Volunteers

- Welcome participants. Explain that the purpose of this module is to provide them with an understanding of how volunteers can contribute to a preventive effort.

Handout #12: "Learning Objectives: Unit B, Module 2"

- Distribute Handout #12 which outlines the learning objectives of this module. Read aloud each objective.
- Ask participants why they think the subject of volunteers is important to the prevention field. Point out that prevention efforts in the drug field usually operate on limited budgets with few staff resources. Involving volunteers is one way of "stretching" these limited resources. Volunteer contributions also represent community support of the effort. Finally, volunteers can help facilitate entry to a community, organizations, or system (such as the schools) which would not otherwise have been readily accessible to the prevention worker.
- Inquire as to what volunteer jobs participants have done relating either to personal interests or to professional concerns. These jobs might include helping out at a blood drive; preparing a newsletter for a local tennis club; working on a church committee; acting as a treasurer for an amateur theatre group; coaching a soccer team; serving on the board of directors of a hospital; driving senior citizens to social programs.
- Ask participants what motivated them to take on these volunteer commitments. Point out that there may be personal motivators (learning a new skill); interpersonal motivators (family members have provided encouragement to volunteer); organizational motivators (an organization put out a "call" for volunteers).

20 minutes

5 large sheets of paper

5 felt pens

Masking tape

2. Small Group Discussion of Volunteer Roles

- Explain that participants will now be asked to consider the roles that volunteers might play in a preventive effort. Divide participants into five small groups. Tape a large sheet of paper on the wall beside each group. Indicate that each group will be asked to consider a different problem. Assign each of the following situations to a different group:
 - an education program in the schools;
 - a mass media campaign to inform individuals about drugs and other efforts;
 - a control strategy attempting to reduce the number of outlets for the sale of alcohol in a particular community;
 - a competence development program which involves teaching communication skills to families;
 - an environmental design program involving the establishment of an alternatives program in a community;
- Ask group members to think of all the possible roles that volunteers might play in that prevention effort. Allow approximately 20 minutes for this discussion.

20 minutes

3. Presentation on Job Design; Recruitment

- Present the material on pages 11 and 12 of the reading "Volunteers", Monograph 2, about job design and the recruitment of volunteers.

25 minutes

Instructional Plan: P.M.

Table 12

HOUR	TIME	FORMAT	MATERIALS
1:30-1:50	20 minutes	Introductory Presentation on Volunteers	Handout #12
1:50-2:10	20 minutes	Small Group Discussion of Volunteer Roles	5 Large sheets of paper 5 Felt pens Masking tape
2:10-2:30	20 minutes	Presentation on Job Design; Recruitment	Monograph 2
2:30-2:55	25 minutes	Small Group Learning Activity on Job Design; Recruitment	Learning Activity #16
2:55-3:10	15 minutes	Break	
3:10-3:25	15 minutes	Presentation on the Placement Interview	Monograph 2
3:25-4:45	80 minutes	Dyads Practise Placement Interview	
4:45-5:00	15 minutes	Presentation on Orientation; Summary	Monograph 2 Visual #12 Overhead projector
5:00		Follow-up Assignment	Monograph 2 Monograph 1

TOTAL 210 minutes
 (3 1/2 hours)

4. Small Group Learning Activity on Job Design; Recruitment

Learning Activity #16: "Volunteer Job Description"

- Request that participants break up into the same groups that they were in for the Small Group Discussion of Volunteer Roles. Each group is to consider the same prevention effort that they worked on earlier.
- Explain that each group is to choose one of the tasks that they had previously identified as appropriate for a volunteer. They are to write a job description for this position. Distribute Learning Activity #16 which outlines the information to be included.
- After participants complete the job description, they are to try to identify at least five places where they may go to recruit volunteers for this effort. Possibilities include neighbourhood centres, community associations, legal and accounting firms, and parent-teacher groups. The source approached will be determined to a large extent by the type of skills being sought. Allow participants approximately 25 minutes to complete both components of this learning activity.

15 minutes

5. BREAK

15 minutes

"Volunteers", Monograph 2.

6. Presentation on the Placement Interview

- Present the material on pages 12 and 13 of the reading "Volunteers", Monograph 2 about the placement interview.

80 minutes

7. Dyads Practise Placement Interview

- Indicate to participants that they will now have an opportunity to practise a placement interview. Divide the group into dyads. Explain that, for the first round, one member of the dyad is to play the role of the prevention worker while the other member is to play the role of a volunteer interested in participating in a preventive effort. They will reverse roles for the second round.
- Indicate that both members of the dyad will have 10 minutes to prepare for the following scenario. The prevention worker is seeking individuals to help set up drug education booths in various locations. Volunteers are required to be present at these booths and answer questions; to do artwork for the displays on the booths; to organize publicity for the project; to keep track of the numbers and types of pamphlets distributed and do reordering where necessary; to participate on the committee evaluating the project.
- Explain that in preparation for the interview, prevention workers should try to identify the specific tasks within each of these jobs. They should also jot down the questions they might ask in order to obtain information about the skills, interests, and past experience of the volunteer. Prospective volunteers should spend the planning time doing some thinking about the type of work they would like to do; the skills they have to offer; the type of work they have done in the past.
- Indicate that the prevention worker and prospective volunteer have never met in person. The latter called the prevention worker after having read an article in the newspaper describing the project and indicating that the end result of this interview should be the assignment of this volunteer to a job which is suitable to his or her interests and abilities. Expectations should be clearly outlined, including how much time the volunteer should expect to give to this job; what type of orientation and training will be provided; how supervision will take place.
- Allow participants approximately 30 minutes to conduct this interview. Indicate that in a real-life situation they would likely require at least an hour for this interview. They may not be able to fully accomplish the end result described above but should nevertheless work toward its achievement.

- After the first role play, allow members of the dyad 10 minutes to discuss the interview.
- Instruct participants to reverse roles. Again, allow 30 minutes for the interview and a 10-minute period for discussion.

15 minutes

8. Presentation on Orientation; Summary

- Conclude this module by presenting the material on page 13 of the reading “Volunteers”, Monograph 2.
- Point out that the questions of training and supervising volunteers will be considered in the discussion of training and supervising staff in Unit C on Program Planning and Implementation.
- Present the highlights from this module:
 1. Volunteer contributions include providing direct service to clients; performing administrative and clerical tasks; carrying out policy-making functions; engaging in public relations activity.
 2. After the types of assistance required have been identified, a job description, which states the tasks to be carried out by the volunteer, should be prepared.
 3. There are a number of ways to recruit individuals, including traditional methods such as contacting the local Central Volunteer Bureau and non-traditional methods such as informal social groups.
 4. A placement interview is generally held with the prospective volunteer in order to arrive at an understanding of the latter’s potential involvement. The interview provides an opportunity for interviewers to find out more information about the volunteers and for volunteers to state their preferences.
 5. Orientation is a form of pre-service training during which information should be provided about the organization, the role of volunteers, and other relevant administrative details.

Visual #12: “Engaging Volunteers in Prevention”, overhead projector

- Show Visual #12 which depicts the process of engaging volunteers in prevention.
- Inquire as to whether there are any questions about the material presented in this module.

9. Follow-Up Assignment

“Volunteers”, Monograph 2

- Read “Volunteers”, Monograph 2.
- In preparation for Day Six, participants should review:

Monograph 1

- “The Influence Strategy”, Monograph 1
- “The Control Strategy”, Monograph 1
- “The Competence Development Strategy”, Monograph 1
- “The Environmental Design Strategy”, Monograph 1

Module 3: Using the Media

PURPOSE

The purpose of this module is to inform participants about the wide variety of tools of communication which can be employed in a preventive effort and to provide them with guidelines regarding the use of the media.

RATIONALE

During the course of their work, prevention workers will likely have occasion to make use of the media as part of an influence strategy or simply to publicize a project, meeting, or other event.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. identify at least five different types of media which may be employed for a preventive effort;
2. describe the major publicity principles to which they should adhere in order to develop a good working relationship with the media;
3. explain how a prevention worker might prepare for a radio or television interview;
4. write a press release;
5. begin to develop a media campaign

TIME

Day Six A.M. – 3 1/2 hours

MATERIALS/EQUIPMENT

“Using the Media”, Monograph 2

Handout #13: “Learning Objectives: Unit B, Module 3”

Handout #14: “Sample Press Release”

Visual #13: “Using the Media”

Overhead projector

Flipchart

Felt pens

Large sheets of paper

Masking tape

FOLLOW-UP ASSIGNMENT

Read “Using the Media”, Monograph 2.

45 minutes

1. Large Group Discussion on the Media

- Welcome participants. Explain that the purpose of this module is to inform them about the wide variety of tools of communication which can be employed in a preventive effort and to provide them with guidelines regarding the use of these media.

Handout #13: “Learning Objectives: Unit B, Module 3”

- Distribute Handout #13 which outlines the learning objectives of this module. Read aloud each objective.
- Ask participants why they think it would be important for prevention workers to have an understanding of using the media.

- Point out that during the course of their work, prevention workers will likely have occasion to make use of the media either as part of an influence strategy or simply to publicize a project, meeting, or other event.
- Explain that the discussion will now focus upon the types of media that can be employed.

Flipchart
Felt pen

- Ask participants to try to identify as many types of media as they are able. Jot down these ideas on a flipchart. Discuss each one in terms of its strengths as well as its potential problems.

25 minutes

2. Presentation on Publicity Principles

- Indicate that it is essential for workers to have a clear understanding of the media resources that exist in their community and what the guidelines are for using these media. Point out that there are several basic publicity principles which are relevant in any situation. These are: shoot squarely, don't ask for "kills", give service, don't beg, don't flood the media, and keep lists updated.

"Using the Media", Monograph 2

- Present the material on pages 15 and 16 of "Using the Media", Monograph 2 about each of these publicity principles.

45 minutes

3. Individual Learning Activity on the Press

- Explain that guidelines for using the media will now be considered. Participants will have an opportunity to partake in learning activities involving the use of media.
- Present the material on pages 18 to 20 of "Using the Media", Monograph 2 which outlines guidelines for using the media.
- Indicate that participants will be asked to write a press release based on the guidelines presented. It should be no more than one paragraph and is intended for placement on the "community billboard" section of the local newspaper. The event to be advertised is a drug information "fair" to be held for a five-day period in a local shopping centre. Participants are to prepare a press release which provides information as to the who, what, where, when, and why of the event. They are free to fill in the specific details. Allow approximately 30 minutes for completion of this activity.

Handout #14: "Sample Press Release"

- Distribute Handout #14 which presents examples of how this press release might have been prepared.

15 minutes

4. BREAK

70 minutes

5. Dyads Develop Media Campaign

- Indicate that the final learning activity will focus upon developing a media campaign.

Large sheets of paper
Felt pens
Masking tape

- Divide group into dyads. (There may be one triad if necessary.) They are to consider themselves to be a prevention team. The team has been asked by their board of directors to develop a "blueprint" for a media

Instructional Plan: A.M.

Table 13

HOUR	TIME	FORMAT	MATERIALS
9:00-9:45	45 minutes	Large Group Discussion on the Media	Handout #13 Flip chart Felt pen
9:45-10:10	25 minutes	Presentation on Publicity Principles	Monograph 2
10:10-10:55	45 minutes	Individual Learning Activity on the Press	Handout #14
10:55-11:00	15 minutes	Break	
11:10-12:20	70 minutes	Dyads Develop Media Campaign	Large sheets of paper Felt pens Masking tape
12:20-12:30	10 minutes	Summary Presentation	Visual #13 Overhead projector
12:30		Follow-up Assignment	Monograph 2

TOTAL 210 minutes
 (3 1/2 hours)

campaign about the foetal alcohol syndrome. The message that the board has decided to promote is that pregnant women should abstain from drinking alcoholic beverages throughout the duration of their pregnancy. The team is to develop a plan for how and where this message is to be promoted. They are to make use of several types of media in presenting this information. A small amount of money has been set aside for the production of materials if needed. Dyads may jot down their ideas on large sheets of paper if they wish.

- Point out that dyads will have an opportunity to present their ideas to their board of directors in the next module on "Presentations". In that module, they will be provided with additional time to prepare for the presentation and to make accompanying visual aids. In the next module, each dyad will be given two sheets of bristol board and a flipchart to help them present their ideas more effectively. At this time, however, they are to focus their attention only upon the plans for the media campaign that they have been asked to develop. Allow participants approximately 70 minutes to plan their campaigns.

10 minutes

6. Summary Presentation

- Review the major points covered in this module.
 1. Prevention workers will likely have many occasions to use the media. They may need to publicize a particular project or event. They may also use the media as the major vehicle for promoting educational messages.
 2. There are a wide range of print media and audiovisual media, all of which should be considered as possible tools of communication for the prevention effort.
 3. Prevention workers planning to use the newspapers, radio, and television media should investigate the specific resources in their own communities to find out the guidelines for access to these media. In addition to the specific guidelines, there are several publicity principles which apply to the use of all media. These are: shoot squarely, don't ask for "kills", give service, don't beg, don't flood the media, keep lists updated.
 4. A good press release should include answers to the questions about the "who", "what", "when", "where", and "why" of the story. The content, structural, and technical guidelines with respect to good copy should always be kept in mind when preparing a feature story.
 5. The most important thing to remember for a press, radio, or television interview is to prepare adequately for the interview. Plan in advance clear answers with respect to the basic questions (who, what, when, where, and why) about the story. Ideally, the interviewee should rehearse a trial interview with a colleague in order to practise giving concise and clear answers.
 6. Because prevention messages will be competing with hundreds of other messages for the public's attention, any persuasion message on radio or television must be succinct, powerful, and behaviourally-oriented. Adequate exposure during times when the target group is listening or watching is essential.

Visual #13: "Using the Media", overhead projector

- Show Visual #13 which summarizes the key points to keep in mind when preparing information or a story for submission to the media.
- Inquire as to whether there are any questions about the material presented in this module.

7. Follow-Up Assignment

"Using the Media", Monograph 2

- Read "Using the Media", Monograph 2.

Module 4: Presentations

PURPOSE

The purpose of this module is to provide participants with guidelines for making effective written and oral presentations.

RATIONALE

The skill of making effective presentations is an integral part of all four prevention strategies. Because prevention entails informing, persuading, and selling ideas, prevention workers will find themselves involved in making presentations at all stages of any preventive effort.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. describe the major stages involved in writing a report;
2. prepare an effective written presentation;
3. identify the major stages involved in making an oral presentation;
4. make an effective oral presentation.

Day Six P.M. – 3 1/2 hours

Day Seven A.M. – 2 hours 25 minutes

TOTAL: – 5 hours 55 minutes.

MATERIALS/EQUIPMENT

- “The Influence Strategy”, Monograph 1
- “The Control Strategy”, Monograph 1
- “The Competence Development Strategy”, Monograph 1
- “The Environmental Design Strategy”, Monograph 1
- “Effective Presentations”, Monograph 2
- Handout #15: “Learning Objectives: Unit B, Module 4”
- Visual #14: “Preparing A Report”
- Visual #15: “Preparing A Verbal Presentation”
- Overhead projector
- Skills Assessment Form #1
- Film: “Oh What A Lovely Report”³
- Film: “Don’t Just Tell Them, Show Them”³
- 16 mm projector

³ Available from International Telefilm Enterprises
Toronto: 47 Densley Avenue, Toronto, Ontario M6M 5A8 (416-251-4483)
Montreal: 1368 Sherbrooke Street East, 3rd Floor, Montreal, Quebec H2L 1M4 (514-526-5931)
Vancouver: 1200 West Pender Street, #601, Vancouver, B.C. V6E 2S9 (604-685-2616)

Instructional Plan: P.M.

Table 14

HOUR	TIME	FORMAT	MATERIALS
1:30-1:40	10 minutes	Introductory Presentation	Handout #15
1:40-2:10	30 minutes	Film on Report Writing	Film 16 mm projector Screen
2:10-2:25	15 minutes	Summary Presentation on Writing Reports	Monograph 2
2:25-3:25	60 minutes	Individual Learning Activity on Report Writing	Monograph 2
3:25-3:40	15 minutes	Break	
3:40-4:20	40 minutes	Group Discussion on Oral Presentations	Flipchart Felt pen
4:20-4:40	20 minutes	Film on Visual Aids	Film 16 mm projector Screen
4:40-5:00	20 minutes	Dyads Work on Oral Presentations	Several sheets of bristol board Felt pens Skills Assessment Form #1
5:00		Follow-up Assignment	Monograph 2 Meet to discuss presentation (oral)

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: A.M.

Table 15

HOUR	TIME	FORMAT	MATERIALS
9:00-9:20	20 minutes	Dyads Work on Oral Presentations	
9:20-11:00	100 minutes	Dyads Make Presentations	Several sheets of bristol board Flipchart Felt pen Skills Assessment Form #1
11:00-11:10	10 minutes	Summary Presentation	Visuals #14 - 15 Overhead projector
11:10-11:25	15 minutes	Break	
11:25-12:30	65 minutes	Begin Module 5	

TOTAL 210 minutes
 (3 1/2 hours)

Screen
Flipchart
Felt pens
Several sheets of bristol board

PARTICIPANT PREPARATION

Participants should review the above readings in Monograph 1 prior to the workshop.

FOLLOW-UP ASSIGNMENT

Read "Effective Presentations", Monograph 2.

10 minutes

1. Introductory Presentation

- Welcome participants. Explain that the purpose of this module is to provide them with guidelines for making effective written and oral presentations.

Handout #15: "Learning Objectives: Unit B, Module 4"

- Distribute Handout #15 which outlines the objectives of this module. Read aloud each objective.
- Ask participants when they might have an opportunity to use this skill.
- Point out that this skill is an integral part of all four prevention strategies. Prevention essentially involves informing, convincing and persuading others, and selling ideas. Audiences might include a board of directors, a board of trustees, politicians, teachers, students, physicians, pharmacists, or public health nurses. In short, prevention workers will likely find themselves making presentations at all stages of any preventive effort.
- Explain that while the term "oral presentation" sounds very formal, it can include not only speeches made to relatively large audiences but also informal talks which may be presented to a small group.

30 minutes

2. Film on Report Writing

- Indicate that while the skills involved in preparing effective written and oral presentations are similar, these skills will be considered separately so that participants have an opportunity to practise both types of presentation.
- Point out that the film to be presented provides a description of the four major phases of work involved in writing an effective report. These stages are investigation, planning, writing and revision.

Film "Oh What A Lovely Report", 16 mm projector, screen

- Show film "Oh What A Lovely Report".

15 minutes

3. Summary Presentation on Writing Reports

"Effective Presentations", Monograph 2

- Review each of the four stages of report writing described in this film by presenting the material on pages 23 and 24 of "Effective Presentations", Monograph 2.

60 minutes

4. Individual Learning Activity on Report Writing

“The Influence Strategy”, “The Control Strategy”, “The Competence Development Strategy”, “The Environmental Design Strategy”, Monograph 1

- Indicate that participants will now have an opportunity to practise writing a brief report based on the guidelines presented. Participants are to work on their own for this learning activity in which they have to write a four-page report on the four major types of prevention strategies. Explain that the investigation stage will have to be done in the classroom by reviewing the relevant readings in Monograph 1.
- Point out that for a report of this size, it is not necessary to include a synopsis. In addition, this report is descriptive only; it will not contain any recommendations. Remind participants that with a short paper, the introduction and conclusion should be brief. Subheadings should be used for the main ideas.
- Explain that upon the completion of these reports, they are to be handed back to the instructor. While the reports will not be graded, comments will be made with respect to the organization of the paper.

15 minutes

5. BREAK

30 minutes

Flipchart

Felt pen

6. Group Discussion on Oral Presentations

- Point out that the subject of preparing oral presentations will now be considered. Ask participants to think about any meeting which they have attended at which there was a speaker giving an informal talk or a formal speech. Ask participants to identify what they liked about that presentation or speech and what they didn't like. Their comments may pertain to any aspect of the presentation including aids, organization of the material, acoustics, or the topic. Jot down these ideas as they are raised on a flipchart on which two columns have been made. One of these columns is entitled “likes”; the other “dislikes”.

20 minutes

Film “Don't Just Tell Them, Show Them”,

16 mm projector, screen

7. Film on Audiovisual Aids

- Explain that audiovisual aids can contribute significantly to the effectiveness of an oral presentation. The aids, however, must be properly employed. Show film “Don't Just Tell Them, Show Them”, which provides some practical tips on using a variety of aids, including the blackboard, the flipchart, and the overhead projector.

20 minutes

Several sheets of bristol board

Felt pens

8. Dyads Work on Oral Presentations

- Explain that participants will now have an opportunity to practise preparing an oral presentation. They are to divide into the same dyad groupings they were in when they worked on the module “Using the Media”. The particular learning activity in which they were engaged at the time was to develop plans for a media campaign on the foetal alcohol syndrome. This was the campaign subject that had been selected by the board of directors. In the last module, participants had spent time developing their plans. They are now to work on how they will present this material to the board of directors (the rest of the class members). Each dyad will have 5-7 minutes to make its presentation (to be made on Day Seven). They can share the speak-

ing or can decide that only one will speak. Two sheets of bristol board and felt pens have been made available to each dyad to use if they would like to present some ideas visually. A flipchart will also be made available at the time of presentation.

- Indicate that participants will have approximately 40 minutes to prepare for and practise rehearsing this oral presentation. (They will have 20 minutes now and 20 minutes on the following morning).

Skills Assessment Form #1

- Explain that after each presentation, all group members will be asked to provide feedback to each dyad based on the points outlined in Skills Assessment Form #1. Members of the dyad will also rate their own performance. Distribute Skills Assessment Forms to participants. (Each participant should receive 1x the number of dyads. For example, if there are six dyads, each participant should receive six forms.)

“Effective Presentations”, Monograph 2

9. Follow-Up Assignment

- Read “Effective Presentations”, Monograph 2. If participants so desire, they can continue to meet to discuss their presentation.

20 minutes

1. Dyads Work on Oral Presentations

- Welcome participants. Indicate that part of this session will be used to complete the module on “Presentations”. Participants are to meet with the partner with whom they have been working on the media campaign.
- Allow dyads approximately 20 minutes to complete their presentation.

100 minutes

Several sheets of bristol board

Flipchart

Felt pen

Skills Assessment

Form #1

2. Dyads Make Presentations

- Ask each dyad to make its presentation to the board of directors (i.e. the other group members) using visual aids if they choose. Allow each dyad approximately 5-7 minutes to make its presentation. After each presentation, ask all participants, including the presenters, to fill in Skills Assessment Form #1. Lead a discussion asking participants to provide feedback to the dyad about the strengths and weaknesses of the presentation. Presenters themselves are free to ask questions or make comments about various aspects of their presentations.
- After discussing the organization, clarity, and delivery of the presentation, group members are also free to make comments about the actual content of the presentation of the media campaign that is being organized.

10 minutes

3. Summary Presentation

- Highlight the major points presented in this module.
 1. Prevention workers will likely have many occasions to make written or verbal presentations. The general guidelines to keep in mind are: preparation, content and delivery.
 2. The key to making effective presentations is adequate preparation. Preparation is comprised of three major activities: analyzing the nature of the audience, considering the meeting facilities, and conducting research.

3. In considering the content, the following question should be kept in mind: what do participants want or need to know after attending a session or reading a report? All presentations should have an introduction, a body, a summary, and a conclusion.
4. In an oral presentation, the delivery is important. Presenters should rehearse their talks in advance and should use audiovisual aids to enhance the presentation when appropriate.
5. There are four major stages involved in preparing a report. These are investigation, planning, writing and revision.

Visual #14: "Preparing A Report", overhead projector

- Show Visual #14 which depicts these four stages.

6. In preparing an oral presentation, it is important to plan the presentation, gather the facts and supporting information, prepare an outline, write a draft and rehearse.

Visual #15: "Preparing A Verbal Presentation", overhead projector

- Show Visual #15 which depicts these key steps in preparing a verbal presentation.
- Inquire as to whether there are any questions about the material presented in this module.

15 minutes

4. BREAK
5. Begin Module 5.

Module 5: Networking

PURPOSE

The purpose of this module is to acquaint participants with the rationale for and the process of networking; that is, why and how to develop and maintain channels of communication with relevant resources in the community.

RATIONALE

Prevention workers will have difficulty carrying out a preventive effort without the involvement of individuals, groups, and organizations in the community. It is for this reason that prevention workers must learn how to make contact with relevant resources and engage them in supporting the prevention effort.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. explain what is meant by the term "networking";
2. explain why networking is important to any preventive effort;
3. identify the individuals who comprise their own personal and professional networks;
4. name at least three ways in which to identify appropriate contacts for a network;
5. describe at least two ways in which networks can be maintained.

TIME

Day Seven A.M. – 1 hour 5 minutes

Day Seven P.M. – 3 hours 30 minutes

TOTAL – 4 hours 35 minutes

MATERIALS/EQUIPMENT

"Networking", Monograph 2
Handout #16: "Learning Objectives: Unit B, Module 5"
Handout #19: "Rules for Lobbying"
Learning Activity #17: "Networks"
Visual #16: "Maintaining Networks"
Overhead projector
Skills Assessment Form #2
Name tags (one per participant)
Refreshments (juice or coffee)

FOLLOW-UP ASSIGNMENT

Read "Networking", Monograph 2.

15 minutes

1. Introductory Presentation

- Explain to participants that the purpose of this module is to acquaint them with the rationale for and the process of networking – that is, why and how they need to develop and maintain channels of communication with relevant resources in the community.

Handout #16: "Learning Objectives: Unit B, Module 5"

- Distribute Handout #16 which outlines the learning objectives of this module. Read aloud each objective.
- Ask participants why they think it would be important to have an understanding of networking.

- Explain that prevention efforts can be successful only if they have the involvement and support of relevant parties. For example, it would not be possible to implement a drug education program in the schools without the support of trustees, principals and teachers. Efforts to set up alternatives programs in communities require the involvement of community members (students, parents, teachers). An environmental design program in the workplace cannot be initiated without the approval of the president, managers, union and employees. Prevention efforts also require support from funding (government and private) and policy sources. In short, no prevention effort can take place in a vacuum. It must be planned and implemented with the assistance and support of relevant parties.

30 minutes

2. Individual Learning Activity on Networks

- Indicate that participants will be asked to complete a learning activity which is intended to help them understand the concept of networks. Point out that they themselves are part of a network. They have a personal network consisting of family, friends and other relevant persons such as a physician, minister, lawyer or music instructor. They also have a network of professional contacts such as supervisor, colleagues, and others outside the work environment. The latter may include social workers in agencies, doctors in clinics, psychologists in private practice, operators of halfway houses, members of Alcoholics Anonymous, college instructors, school principals or volunteers. This learning activity, which is to be completed by participants on an individual basis, may help them become more aware of the networks of which they are a part.

Learning Activity #17: "Networks"

- Distribute Learning Activity #17. Indicate that participants are to try to identify at least 15 individuals who comprise their personal network. These are the people with whom they keep contact on a regular basis. They are then to identify at least 15 individuals who comprise their professional network. Participants should try to identify professional contacts *outside* their own immediate work environments. Allow participants approximately 30 minutes to complete this learning activity. If participants finish the learning activity before the allocated time, they can be asked to share their answers with respect to their professional networks.

20 minutes

3. Individual Learning Activity on Purpose of Networks

- Ask participants why professional contacts are important to their work.
- Point out that in their own work situations, participants are linked with other individuals for one or more of a number of reasons. Contacts in the network may provide a professional service; a resource (staff, funds, equipment); information or technical assistance; moral support. These contacts may be able to expedite the preventive effort by facilitating prevention workers' entry into a system or by introducing them to others who are able to provide resources, service or information.

Learning Activity #17: "Networks"

- Ask participants to consider the professional network that they have just identified in Learning Activity #17. They should jot down within each circle the letter "s", "r", "i", "m" or "e" to represent service providers, resource provider, information provider, moral supporter, or expeditor respectively. They may enter more than one letter within each circle if appropriate. For example, a school trustee may be a provider of resources (funds) as well as an expeditor (helps them gain entry to the schools).
- Allow participants approximately 20 minutes to complete this part of the learning activity.

LUNCH
30 minutes

Instructional Plan: A.M.

Table 16

HOUR	TIME	FORMAT	MATERIALS
9:00-11:25	145 minutes	Complete Module #4	
11:25-11:40	15 minutes	Introductory Presentation	Handout #6
11:40-12:10	30 minutes	Individual Learning Activity on Networks	Learning Activity #17
12:10-12:30	20 minutes	Individual Learning Activity on Purpose of Networks	Learning Activity #17

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: P.M.

Table 17

HOUR	TIME	FORMAT	MATERIALS
1:30-2:00	30 minutes	Learning Activity on Developing Networks	Learning Activity #17 Monograph 2
2:00-3:25	85 minutes	Large Group Learning Activity on Informal Contacts	Name tags Refreshments (optional)
3:25-3:40	15 minutes	Break	
3:40-4:10	30 minutes	Presentation on Recruiting Network Members	Monograph 2
4:10-4:50	40 minutes	Discussion on Maintaining Networks	Flipchart Felt pen Monograph 2
4:50-5:00	10 minutes	Summary Presentation	
5:00		Follow-up Assignment	Monograph 2 Handout #19 Monograph 1

TOTAL 210 minutes
 (3 1/2 hours)

4. Learning Activity on Developing Networks

- Indicate to participants that they should again consider the members of their professional network. They should indicate beside each circle how this individual became part of their network of contacts. This could have happened through a mediator (a third person who helped facilitate the contact); because of similar interest (they are members of the same committee); by virtue of the position held by that individual. Participants are free to indicate other ways as well. Allow participants approximately 15 minutes to complete this component of Learning Activity #17.

Learning Activity #17: "Networks"
"Networking", Monograph 2

- Point out that there are many ways in which to identify the contacts that may be appropriate to involve in a network. Present the material on pages 29 and 30 of "Networking", Monograph 2.
- Explain that once the individuals have been identified, it is then important to make contact with these persons. Contact can be made informally or through well-planned, structured interview situations. Other methods include street work, calling a public meeting, setting up information booths, or conducting a survey. The first two methods will be practised here through group activities.

85 minutes

5. Large Group Learning Activity on Informal Contacts

- Point out that participants will now be provided with an opportunity to practise making informal contacts. Indicate that they are to imagine that they have just attended the annual meeting of a local social service agency. The formal meeting is followed by an informal mingling session in which members of the community are free to chat with each other about community issues and their work. At this meeting, there are (approximately six) prevention workers who are about to embark upon a program to reduce the incidence of impaired driving in that community. They hope to do this using the influence strategy (education programs, mass media campaigns) as well as the control strategy (seeking more adequate enforcement of the law). They realize that they can use this annual meeting opportunity to discuss the proposed effort with relevant community members and to seek some form of support. In addition to the six prevention workers, the guests include one police officer, the mayor, a journalist from a local newspaper, a social worker from the emergency ward of a general hospital, a judge from the local court, and the president of the restaurant and bar owners association. Two or three participants can be asked to act as observers. (If there are more participants than roles identified here, more roles can be added such as a family physician, the president of the local parent-teachers' association, or the host of a local radio talk show. Similarly, if there are fewer participants, there can be fewer prevention workers and fewer invited guests. In general, there should be an equal number of prevention workers and of invited guests so that they can meet on a one-to-one basis.)

Name tags (one per participant)

- Randomly assign these roles to members of the group by providing each with a name tag that identifies the role they are to play. (These name tags can be selected from a box.)
- Explain that the purpose of this simulation is to demonstrate how prevention workers might take advantage of a community situation such as this to make informal contacts.
- Allow all participants approximately 10 minutes for planning time. Community representatives other than prevention workers should consider what they would have to offer (funds, information, moral support, entry to a system). They need not necessarily support the effort; they may, if they so desire, play "devil's advocate". In this case, however, their criticisms of the effort must be valid. As a community representative, they must recognize that impaired driving is a major problem and they must consider seriously their responsibility in helping to reduce the extent of the problem.
- Indicate that prevention workers should do their planning together. They are to decide which workers might approach which guests. In this scenario, prevention workers do not know any of the other invited

guests whom they will be informally approaching. They must therefore introduce themselves and take some time to find out a little about the other party before they discuss the preventive effort they wish to promote. They are then to explain the preventive effort and try to win the other party's support. Prevention workers may not necessarily get any firm commitments regarding particular types of support. It is usually too early for any party to offer support unless he or she is considering becoming involved in a similar effort and is ready to provide resources immediately. At this stage of networking, prevention workers should aim primarily to generate interest.

- After the planning period, allow participants approximately 40 minutes to mingle with the community representatives who are at this meeting. (If so desired, coffee and/or juice can be served to simulate a real meeting situation.)
- After the allocated time, lead a group discussion about the network process. Ask observers to comment about what they saw. Ask prevention workers about the outcomes of their contacts. Ask the participants who played other roles about their reactions with respect to what commitments, if any, they made to support the effort. Allow approximately 35 minutes for this discussion.

15 minutes

6. BREAK

7. Presentation on Engaging Network Members

- Point out that a more structured form of networking will now be considered. The purpose of more structured networking is to try to "engage" potentially interested individuals in the preventive network. In other words, prevention workers will be doing more than simply providing information about the proposed prevention effort. Rather, they will be attempting to motivate individuals to consider making a formal commitment to support the preventive effort in some way.

"Networking", Monograph 2

- Present the material on pages 31 and 32 of "Networking", Monograph 2.

40 minutes

"Networking", Monograph 2

Flipchart, felt pen

8. Discussion on Maintaining Networks

- Indicate that the final but ongoing aspect of the networking process is maintaining contacts once they have been made. Ask participants how they might go about maintaining networks once these have been formed. List these ideas on a flipchart as they are raised. Link these points with the material presented on pages 32 and 33 of "Networking", Monograph 2.

10 minutes

9. Summary Presentation

- Highlight the major points with respect to networking:
 1. Networks are pathways of communication that provide channels for sharing information, for coordination, for collaboration, and for collective action.
 2. The major tasks involved in developing networks include identifying the appropriate parties to involve in the network, making contact with them on a formal or informal basis, and following through on the initial contact.
 3. There are a variety of ways to identify the individuals who might comprise part of an active network of contacts. These include individuals who have been involved in similar efforts; who have access to key resources; who ought to be involved by virtue of their positions.

4. After having identified individuals who would be a part of the network, prevention workers must engage these persons in this communication system. Motivating individuals to consider the possibility of contributing to the prevention effort involves developing their awareness of issues and explaining the benefits of their contribution in regard to the interests of both parties.

5. Networking involves both making and maintaining contacts. This can be done in a number of ways, including involving individuals in a committee or sending minutes and newsletters.

6. The most important aspect of maintaining contacts is the coordination of information. As the "hub" of the network, prevention workers coordinate information by determining what facts would be appropriate to share with various parties and disseminating the information to these individuals.

Visual #16: "Maintaining Networks",
Overhead projector

- Show Visual #16 which depicts the prevention worker as coordinator of information.
- Inquire as to whether there are any questions about the material presented in this module.

10. Follow-Up Assignment

"Networking", Monograph 2

- Read "Networking", Monograph 2.

Monograph 1

Handout # 19: "Rules for Lobbying"

- In preparation for the afternoon of Day Eight, participants should review "Drug Use: An Overview", and "The Control Strategy", Monograph 1. Distribute Handout #19. Instruct participants to review this handout so that they will have a general understanding of the nature of the lobbying activity in which they will be involved on the following day.

Module 6: Meetings

PURPOSE

The purpose of this module is to provide participants with guidelines for planning effective meetings and for chairing committees.

RATIONALE

Prevention workers will likely have occasion to organize a variety of meetings in the course of planning and implementing a preventive effort. It is therefore important for them to know how to organize these effectively in order to maximize the productivity of the meeting. Prevention workers may also be required to chair a committee or to teach this skill to others when helping them assume responsibility for a preventive effort.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. identify the major factors which must be taken into consideration when planning a meeting;
2. describe the major steps involved in the planning process;
3. begin planning a meeting;
4. identify at least five major "rules of order" for committee meetings.

TIME

Day Eight A.M. – 3 1/2 hours

MATERIALS/EQUIPMENT

"Guidelines for Meetings", Monograph 2
Handout #17: "Learning Objectives: Unit B, Module 6"
Learning Activity #18: "Planning Meetings"
Flipchart
Felt pen
Film: "Meetings Bloody Meetings"⁴
16 mm projector
Screen

FOLLOW-UP ASSIGNMENT

Read "Guidelines for Meetings", Monograph 2.

45 minutes

1. Presentation on Planning Meetings

- Welcome participants. Explain to them that the purpose of this module is to provide them with guidelines for planning effective meetings and for chairing committees.

Handout #17: "Learning Objectives: Unit B, Module 6"

- Distribute Handout #17 which outlines the objectives for this module. Read aloud each objective.
- Ask participants why they think it would be important for them to have an understanding of this subject area.

⁴ This film may be obtained from International Telefilm Enterprises.
Toronto: 47 Densley Avenue, Toronto, Ontario M6M 5A8 (416-241-4483)
Montreal: 1368 Sherbrooke Street East, 3rd Floor, Montreal, Quebec H2L 1M4 (514-526-5931)
Vancouver: 1200 West Pender Street, #601, Vancouver, B.C. V6E 2S9 (604-685-2616)

Instructional Plan: A.M.

Table 18

HOUR	TIME	FORMAT	MATERIALS
9:00-9:45	45 minutes	Presentation on Planning Meetings	Handout #17 Flipchart Felt pen Monograph 2
9:45-10:45	60 minutes	Small Groups Plan Meetings	Learning Activity #18
10:45-11:00	15 minutes	Break	
11:00-11:30	30 minutes	Groups Share Plans	
11:30-12:00	30 minutes	Film on Conducting Meetings	Film 16 mm projector Screen
12:00-12:25	25 minutes	Presentation on Chairing Committees	Monograph 2
12:25-12:30	5 minutes	Summary Presentation	Monograph 2
12:30		Follow-up Assignment	

TOTAL 210 minutes
 (3 1/2 hours)

- Explain that prevention workers will likely have occasion to organize a variety of meetings in the course of planning and implementing a preventive effort. It is important for them to know how to organize these effectively in order to maximize the productivity of the meeting. Prevention workers also may be required to chair a committee or to teach this skill to others when helping them assume responsibility for a preventive effort.

Flipchart
Felt pen

- Ask participants to think about any meeting which they have ever been required to plan. Inquire as to what steps they had to take to plan the meeting and what factors they had to consider (such as location, speakers). Jot down participants' responses on a flipchart.

"Guidelines for Meetings", Monograph 2

- Present the material on pages 35 and 36 of "Guidelines for Meetings", Monograph 2 about the key components of meetings.

60 minutes

2. Small Groups Plan Meetings

- Indicate that participants will now have an opportunity to practise planning a meeting. Divide participants into three small groups. Explain that group one is to make plans for a neighbourhood meeting whose purpose is to discuss a drug education program to be implemented in the local school within the next few months. Group two is to plan a meeting in a specific neighbourhood in order to discuss the drug problem in that community. The third group is to plan a public meeting about "fighting the problem of impaired driving". The sponsoring organization can afford to spend a limited amount of money for publicity purposes.

Learning Activity #18: "Planning Meetings"

- Explain that groups are to consider the following factors. Jot these down on a flipchart:
 - the objectives of the meeting, that is, what they would like to accomplish;
 - what the content should include; how this content will be presented to/considered by the audience;
 - whether guest speakers or group leaders are required and how these will be selected;
 - location of meetings;
 - seating arrangements;
 - publicity;
 - possible follow-up actions;
 - refreshments.

They must also decide who will take responsibility for various activities. They can assign these tasks to one of their own group members or to a theoretical person such as parent, teacher, student, or prevention worker.

- Distribute Learning Activity #18 which outlines these areas. Groups are to write down an answer after each point only after they have discussed it and arrived at a consensus. Point out that after the planning period, participants will be asked to share their meeting plans with the other group members based on their answers to Learning Activity #18.
- Indicate that groups will have one hour to plan this meeting.

15 minutes

3. BREAK

30 minutes

4. Groups Share Plans

- Allow each group approximately 10 minutes to share their plans for the meeting.

30 minutes

Film: "Meetings Bloody Meetings", 16 mm projector, screen

5. Film on Conducting Meetings

- Point out that prevention workers will also have occasion to chair committees or to teach this skill to members of the community such as parents or adolescents.
- Explain that the movie highlights some of the "do's and don'ts" of planning and conducting committee meetings. Show the film "Meetings Bloody Meetings".

25 minutes

"Guidelines for Meetings", Monograph 2

6. Presentation on Chairing Committees

- Present the material outlined on pages 38 and 39 of "Guidelines for Meetings", Monograph 2 about chairing committees.
- Inquire as to whether there are any questions about the material presented in this module.

5 minutes

7. Summary Presentation

- Highlight the key points about conducting meetings:
 1. In planning a meeting, consideration should be given to the following factors: the people who will be attending, the purpose of the meeting, "climate" or atmosphere, place, costs, time, resources, agenda, and follow-up action.
 2. The key steps involved in planning a meeting are: establishing realistic objectives; determining the type of meeting required; developing systematic planning procedures; assigning tasks.
 3. While it is not possible to anticipate every conceivable situation, it is possible to make tentative plans for how various situations might be handled if they do arise. Such situations include dealing with latecomers or stimulating audience participation.
 4. Important aspects of chairing committees include clarifying the mandate, selecting appropriate members, and setting clear agendas which should be sent to all members well in advance of the meeting. Rules of order include starting on time; approval of the minutes; discussion of agenda items; assignment of tasks; recapitulation of key decisions taken.
- Inquire as to whether there are any questions about the material presented in this module.

"Guidelines for Meetings", Monograph 2

8. Follow-Up Assignment

- Read "Guidelines for Meetings", Monograph 2.

Module 7: Lobbying

PURPOSE

The purpose of this module is to provide participants with an understanding of the skill of lobbying.

RATIONALE

Prevention workers may have occasion to engage in a lobbying effort when they have to convince groups such as school board trustees, company managers, or their own board of directors to undertake certain actions. Lobbying is a particularly important skill for prevention workers employing the control strategy. In this case, they are attempting to effect changes in legislation, regulations or policies.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. explain what is meant by "lobbying";
2. describe the three major lobbying strategies;
3. identify the difference between direct and indirect methods of lobbying.

TIME

Day Eight P.M. – 3 1/2 hours

MATERIALS/EQUIPMENT

"Lobbying", Monograph 2
Handout #18: "Learning Objectives: Unit B, Module 7"
Handout #19: "Rules for Lobbying"
Felt pens
Seven tables
Moveable chairs
Flipchart
Colour-coded badges (one per participant)
20 red chips
25 blue chips
3 yellow chips

INSTRUCTOR PREPARATION

In preparation for this module, instructors should:

- read the instructions several times in order to become entirely familiar with the rules of this learning activity;
- determine how many participants will be assigned to each role. The numbers may vary from those outlined in the module depending upon the number of participants;
- prepare a colour-coded badge for each role;

- set up the room as presented in the diagram in the module and hang a sign on each table indicating “community influentials”, “politicians”, and other roles;
- prepare the red (power), blue (knowledge), and yellow (political authority) chips and allocate them to the appropriate tables.

PARTICIPANT PREPARATION

Participants should review “Drug Use: An Overview”, and “The Control Strategy”, Monograph 1 prior to this module. They should also review the rules outlined in Handout #19.

FOLLOW-UP ASSIGNMENT

Read “Lobbying”, Monograph 2.

25 minutes

1. Large Group Discussion on Lobbying

- Welcome participants. Explain that the purpose of this module is to provide them with an understanding of the skill of lobbying.

Handout #18: “Learning Objectives: Unit B, Module 7”

- Distribute Handout #18 which outlines the learning objectives for this module. Read aloud each objective.
- Ask participants under what circumstances it may be necessary for prevention workers to employ this skill.
- Point out that prevention workers in the drug field may have occasion to engage in a lobbying effort when they have to convince groups such as school board trustees, company managers, or their own board of directors to undertake certain actions. Lobbying is a particularly important skill for prevention workers employing the control strategy. In this case, they are attempting to effect changes in legislation, regulations or policies.
- Ask participants to identify some of the lobbying efforts of which they are aware in their community, province, or the country as a whole. Examples may include activities in areas other than the alcohol and drug field.

Flipchart

- Indicate that participants will now consider how to undertake a lobbying effort. Their board of directors has prepared a statement to the effect that young people have been negatively influenced by the advertising of liquor. Directors are especially concerned about lifestyle advertising which associates sociability, good looks, and an exciting life with the use of alcohol. The board would like to see a ban on the lifestyle advertising of alcoholic beverages. They have requested prevention workers to lobby for these changes. Ask participants to brainstorm as to how they would approach this problem. What would have to be done? Who would have to be influenced? Who could help out in this effort? Which parties would likely oppose the effort and how might their concerns be countered? Jot down these ideas on a flipchart.

30 minutes

“Lobbying”, Monograph 2

2. Presentation on Lobbying

- Present the material in the reading “Lobbying”, Monograph 2 about the three major lobbying strategies.

15 minutes

3. BREAK

80 minutes

Instructional Plan: P.M.

Table 19

HOUR	TIME	FORMAT	MATERIALS
1:30-1:55	25 minutes	Large Group Discussion on Lobbying	Handout #18 Large sheets of paper Felt pen Masking tape
1:55-2:25	30 minutes	Presentation on Lobbying	
2:25-2:40	15 minutes	Break	
2:40-4:00	80 minutes	Large Groupe Exercise on Lobbying	Handout #19 Seven tables Moveable chairs 20 Red chips 25 Blue chips 3 Yellow chips
4:00-4:45	45 minutes	Follow-up Discussion	
4:45-5:00	15 minutes	Summary Presentation	
5:00		Follow-up Assignment	Monograph 2

TOTAL 210 minutes
 (3 1/2 hours)

4. Large Group Lobbying

- Indicate that participants will now have an opportunity to simulate the lobbying process. This will be done by means of a community game in which all members of the group are assigned specific roles. There will also be a small group of observers who will watch the interaction and who will be required to provide feedback about the process upon the completion of the game.
- Explain that this game is a representation of the “real world” in which prevention workers will function. There are several roles to be played by participants including: prevention workers, representatives of the alcohol industry, politicians, members of consumer groups, community influentials, a representative from the business community, social workers from local counselling agencies and media representatives. There are to be three prevention workers and two or three individuals assigned to each role. (Instructors must decide in advance how many participants will be assigned to each role; this depends upon the total number of participants in the group).

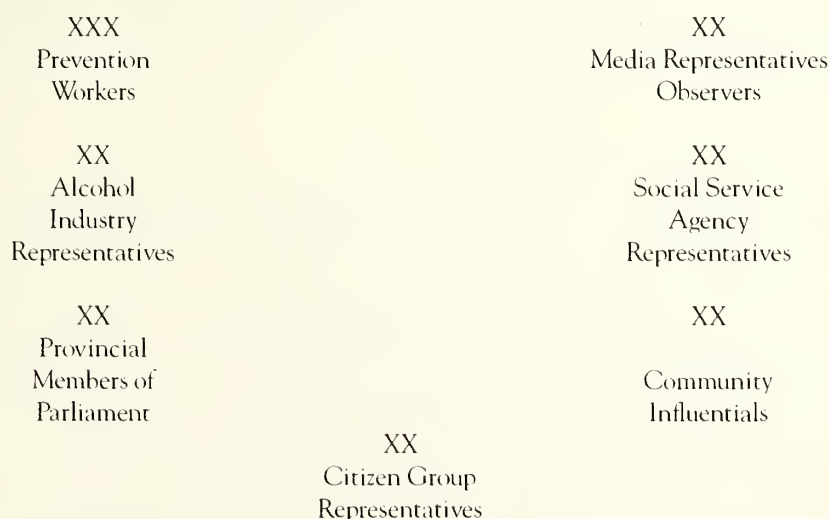
Flipchart
Felt pens

- Point out that colour-coded badges have been prepared for each type of role. Mark down the colour coding on a flipchart as follows:

– prevention workers	: green
– alcohol industry representatives	: red
– provincial members of parliament	: yellow
– citizen group representatives	: blue
– community influentials	: orange
– social service agency representatives	: purple
– media representatives	: brown
– observers	: pink

Seven tables
Moveable chairs

- Indicate that all individuals playing the same role should be seated together at the same table. The room might be set up as outlined below. A sign indicating the role should be attached to each table and should be clearly seen by participants.



- Explain that in this arrangement, there are three prevention workers and two (or three) individuals playing each of the other roles. The prevention workers are to act as a team. They are trying to bring about a specific legislative change (described below).

- Indicate that in addition to prevention workers, participants will be asked to play the following roles:
 - the two individuals representing the alcohol industry are the owner of a local chain of restaurants and the president of the largest distillery in the country.
 - the two politicians are members of the provincial legislative assembly. One is a backbencher and the other is the Minister of Health.
 - the two citizen group representatives are the president of a parents' association and a president of the local chapter of MADD. (Mothers Against Drunk Drivers).
 - one community influential is the president of the local Chamber of Commerce. The other is a physician who is the president of the local medical association.
 - the two representatives from social service agencies are a social worker specializing in the counselling of alcoholics and a youth worker from the local youth services bureau.
 - the media representatives are members of local newspapers.

Note: If instructors desire, they can add a further dimension to these roles by indicating the existence of certain inter-personal relationships. For example, the president of local Chamber of Commerce could be married to the social worker specializing in the counselling of alcoholics. The Minister of Health could be the brother of the president of the local medical association. These personal links serve not only to “spice up” the game but also help participants experience the realities of a small community.

Colour-coded badges

- Allow participants an opportunity to choose the role they would like to play and to take the seat at the table designated for that position. Distribute colour-coded badges with the specific position designated on the badge. For example, the physician would receive an orange badge with the title “President of the local Medical Association” written on it.
- Explain that the issue at hand is that prevention workers have become concerned about the increasing popularity of “happy hours” and the possible social and health consequences of this phenomenon.
- Indicate that the roles that have been designated represent the forces with which prevention workers would have to deal in a real-life situation involving an issue of this nature. Explain that each of these groups seated at different tables have a certain amount of power, knowledge, and political authority. These three aspects will be called “strategic resources”. Power is represented by red chips, knowledge by blue chips, and political authority by yellow chips.

20 Red chips

25 Blue chips

3 Yellow chips

- Distribute chips (which can be made by cutting small circles out of coloured paper) to players in the following combinations: (Show all participants what each group is receiving.)
 - prevention workers: 1 red chip (power); 5 blue chips (knowledge)
 - alcohol industry representatives: 10 red chips (power); 4 blue chips (knowledge)
 - provincial members of parliament: 3 yellow chips (political authority)
 - citizen group representatives: 5 red chips (power); 4 blue chips (knowledge)
 - community influentials: 3 red chips (power); 2 blue chips (knowledge)
 - social service agency representatives: 1 red chip (power); 10 blue chips (knowledge)
 - media representatives: none
 - observers: none

- Explain that in order to achieve the goal of restricting the availability of alcohol, prevention workers must obtain strategic resources. More specifically, they must obtain three political authority points. Prevention workers may try to obtain political authority points directly by meeting with politicians and convincing them of the importance and correctness of their cause. If politicians are convinced, they may issue a political authority point. If only one politician has been approached, he or she will have to convince his or her colleague before issuing the point. Only one political authority point can be issued per meeting with politicians. Prevention workers can also get points indirectly (described in more detail below). Every time prevention workers are able to increase their strategic resources by putting together five knowledge points and three power points, they can automatically collect one political authority point from the politicians. The ultimate objective is for prevention workers to obtain three political authority points by direct and/or indirect means. (This means they would have to collect 15 knowledge points and nine power points if they were going to use indirect means only.)
- Explain in more detail how prevention workers may obtain points indirectly. Prevention workers can do this by meeting with any of the groups and by obtaining their support in the form of strategic resources – their power or knowledge. Prevention workers must work together to plan strategy as to how they will obtain the strategic resources they need to achieve their goal. This will involve meeting with representatives of various groups and trying to convince them to support the preventive effort. Prevention workers can use whatever argument they wish to win the other's support including quoting information from the readings "Drug Use: An Overview" and "The Control Strategy". They may meet one individual from a group although one individual alone cannot give away more than half of the knowledge and half of the power chips that belong to that group. Individuals are free to decide what combination of the strategic resources they will give to the prevention worker. If a group decides to give all its strategic resources to the prevention worker, that group should then be considered part of the coalition and should be involved with the prevention workers in planning future strategy for obtaining strategic resources.
- Indicate that prevention workers can work on an individual basis if they choose to convince other parties to support their effort. They should come back together for regular, brief strategy sessions to plot and plan their future course of action.
- Point out that parties who are not actively participating for short periods of time may talk with other parties to discuss their stance regarding the question of restricting the availability of alcohol. They may try to form their own "counter-coalitions" and pool their resources. Or they may try to meet with politicians to persuade them not to support the prevention effort.
- Explain that the role of media representatives is to act as observers and to act as "bearers of information" where appropriate. For example, they may want to prepare a press release and pass it around to all parties after they have interviewed a politician or community representative.
- Explain that the role of observers is to act as listeners to the interactions taking place. They are permitted to walk around and sit behind any of the dialogues. Throughout the entire simulation, they are to remain silent but should be jotting down notes as to how effective they feel various interactions have been.

Handout #19: "Rules for Lobbying"

- Ask participants to refer to Handout #19 which summarizes the rules outlined above. Participants can refer to these rules at any time throughout this simulated lobbying session.
- Point out that in this learning activity there is no pre-determined end result that will necessarily occur. Prevention workers may or may not be able to achieve their desired objective. This will depend upon their ability to convince others to support their effort and the willingness of these others to "give" their strategic resources to the prevention workers. Point out that what is especially important in this activity is not the end result but the process of lobbying, of determining targets; forming coalitions; convincing others to support a particular point of view.
- Allow participants approximately 15 minutes before beginning this lobbying activity to determine their strategy. Prevention workers should work as a team and use the time to plan strategy for obtaining the points they need. Observers should discuss what they will be looking for when observing the interactions.

The other players should decide on an individual basis where they will stand on this issue and should jot down some questions that they will pose to the prevention workers who will approach them for their support.

- Inquire as to whether there are any questions about this lobbying activity before participants begin.
- After the 15-minute planning period, indicate that participants will have approximately 65 minutes for this lobbying activity.

45 minutes

5. Follow-Up Discussion

- Allow participants approximately 45 minutes to discuss this lobbying activity. Observers should first be allowed to relay their comments about how effectively the lobbying was conducted; what other coalitions could have been formed; how forceful the arguments used by various parties appeared to be. All participants should then have an opportunity to share their reactions to the learning activity.

15 minutes

6. Summary Presentation

- Highlight the major points with respect to lobbying:
 1. Lobbying is a process of communication between decision-makers within an organization and outside groups attempting to influence the content of the former's decisions. Lobbying can be undertaken for a number of purposes including motivating individuals who are committed to a particular issue or modifying the opinions of those who are opposed in order to influence the decisions they will make on that issue.
 2. Prevention workers may have numerous occasions to engage in lobbying when trying to convince a group to undertake a certain effort or when attempting to effect changes in legislation, regulations or policies.
 3. The first step in any lobbying process is to determine what policy, regulation or legislation requires enactment or modification. The next step is to determine who has the authority to make decisions in that particular area.
 4. Sometimes it is not easy to determine how decisions are made within a particular government department. There are a number of ways to find out about this, including consulting individuals who have had experience working with that department or finding out whether there are any committees which make recommendations to that department.
 5. In any lobbying effort, there may be direct or indirect targets. In the latter case, prevention workers would focus their efforts upon third parties who may play a role in the policy-making process.
 6. The three major lobbying strategies are cooperation, campaign and contest. The strategy ultimately chosen will depend upon the situation at hand. If there is basic agreement with the change objective, then the cooperation strategy is likely appropriate. When there is no agreement but it is likely to be obtained through persuasion, the campaign strategy is often used. Finally, contest may be selected as a strategy when there is no agreement and it is felt that this is going to be very difficult to obtain.
 7. The strategies need not be mutually exclusive. For example, prevention workers might undertake a cooperation strategy with elected officials and might employ the campaign strategy to influence the general public to support a prevention effort.
 8. When lobbying for particular changes, it is often helpful to form a coalition which represents a concentration of power. When working with a coalition, however, it is essential to ensure that the lobbying activity represents a team effort and that all parties to the coalition agree to the strategy(ies) to be undertaken.
- Inquire as to whether there are any questions about the material presented in this module.

"Lobbying", Monograph 2

7. Follow-Up Assignment

- Read "Lobbying", Monograph 2.

Module 8: Community Mobilization

PURPOSE

The purpose of this module is to acquaint participants with the process of community mobilization.

RATIONALE

Prevention does not take place on a one-to-one basis as does a treatment relationship. Rather, prevention is targeted toward groups and entire communities. Prevention workers must therefore have a good understanding of how to learn about various communities and how to engage the members of those communities in the prevention effort.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. explain what is meant by community mobilization;
2. identify the difference between a geographic and a functional community;
3. describe at least three ways in which prevention workers can learn about and gain the trust of a community;
4. state how prevention workers might identify key actors in a community;
5. describe how the major problems in a community might be identified.

TIME

Day Nine A.M. – 3 1/2 hours

Day Nine P.M. – 3 1/2 hours

TOTAL – 7 hours

MATERIALS/EQUIPMENT

“Community Mobilization”, Monograph 2
Learning Activity #19: “Community Assessment”
Handout #20: “Learning Objectives: Unit B, Module 8”
Visual #17: “Mobilizing a community”
Three flipcharts
Three felt pens
Program Evaluation Form

FOLLOW-UP ASSIGNMENT

Read “Community Mobilization”, Monograph 2

45 minutes

1. Introductory Discussion on Community Mobilization

- Welcome participants. Explain that the purpose of this module is to discuss the process of community mobilization.

Handout #20: “Learning Objectives: Unit B, Module 8”

- Distribute Handout #20 which outlines the learning objectives of this module. Read aloud each objective.
- Ask participants to share their understanding of the term “Community Mobilization”.
- Inquire as to whether any of them has ever been involved in a community mobilization effort. Ask them to describe this effort: what the problem was; how they organized a group of key actors; what action was

Instructional Plan: A.M.

Table 20

HOUR	TIME	FORMAT	MATERIALS
9:00-9:45	45 minutes	Introductory Discussion on Community Mobilization	Handout #20
9:45-10:45	60 minutes	Individual Learning Activity on Community Assessment	Learning Activity #19 Monograph 2
10:45-11:00	15 minutes	Break	
11:00-11:30	30 minutes	Large Group Discussion on Community Assessment	Flipchart Felt pen
11:30-12:30	60 minutes	Presentation on Community Mobilization	Monograph 2

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: P.M.

Table 21

HOUR	TIME	FORMAT	MATERIALS
1:30-2:15	45 minutes	Large Group Discussion on Identifying Needs	Flipchart Felt pen
2:15-3:25	70 minutes	Small Groups Develop Plans	3 Flipcharts 3 Felt pens
3:25-3:40	15 minutes	Break	
3:40-4:20	40 minutes	Groups Share Plans	
4:20-4:30	10 minutes	Summary Presentation	
		Follow-up Assignment	Monograph 2
4:30-5:00	30 minutes	Feedback Session	Program Evaluation Form

TOTAL 210 minutes
 (3 1/2 hours)

taken. (Or they may want to describe a community mobilization effort in which they were not personally involved but which took place in their jurisdiction). Inquire as well as to what dilemmas or difficulties a prevention worker might experience in mobilizing a community.

60 minutes

2. Individual Learning Activity on Community Assessment

- Explain that prevention workers as community mobilizers must have a good understanding of the community with which they will be working. Such an understanding can be gained by talking formally and informally with community members. It can also be promoted by being involved in community life. Explain that participants will have an opportunity to do some thinking about community assessment by completing a learning activity.

Learning Activity #19: "Community Assessment"

- Distribute Learning Activity #19. For this learning activity (which they are to complete on an individual basis), they are to consider the neighbourhood in which they at present live as the community which they hope to mobilize around a drug-related problem. They are to answer these questions to the best of their ability. If they are unable to answer a particular question, they should indicate on the learning activity how they would go about obtaining this information. Allow participants approximately 30 minutes to complete this learning activity.

"Community Mobilization", Monograph 2

- Lead a discussion asking participants to share their responses to selected questions on the learning activity. Present the material in the reading "Community Mobilization", Monograph 2 which explains the difference between a geographic and a functional community.

15 minutes

3. BREAK

30 minutes

Flipchart, felt pen

4. Large Group Discussion on Community Assessment

- Ask participants to consider the following situation. Say that they were a group of prevention workers who have been asked by their board of directors to set up an "after 4 p.m." program for adolescents in a particular neighbourhood. The prevention workers, however, are not familiar with this community. How would they find out about this community? Who would the key actors be for this issue? How would they be found? How could they be engaged in this preventive effort (i.e. what would they have to offer)? What resources exist in this community that might contribute to this effort (volunteers, space, funds)? These discussion points can be noted on a flipchart to facilitate participation in the discussion.

60 minutes

"Community Mobilization", Monograph 2.

5. Presentation on Community Mobilization

- Present the material in the reading "Community Mobilization", Monograph 2.

LUNCH

45 minutes

1. Large Group Discussion on Identifying Needs

- Explain to participants that they will now be considering several aspects of the process of community mobilization which were presented earlier.

Flipchart, felt pen

- Ask participants to consider the following situation. Say that they were going to mobilize their own neighbourhoods to set up a program to reduce the incidence of impaired driving in that community. Whom would they approach in their own neighbourhoods to take an active organizing role in this effort (e.g. teachers, parents, public health nurse etc.)? Jot these “players” down on a flipchart. Ask participants to identify why they have selected these individuals as potential key players? What do these individuals bring to the group (credibility, money, power, personal interest)? Jot down these points beside each player on the list.

Flipchart, felt pen

- Ask participants to identify all the possible actions that might be undertaken to reduce the incidence of impaired driving in that neighbourhood. Participants should try to think of activities from all four types of prevention strategies (influence, control, competence development, environmental design). Again jot down these ideas on a flipchart as they are raised by participants. Because this large group discussion is a “brainstorming” exercise, participants should be encouraged to be as innovative and as creative as possible.

70 minutes

2. Small Groups Develop Plans

- Indicate to participants that they will now be asked to develop some plans for taking action. The group of key actors who had been brought together by the prevention worker has decided that several committees will be required in order to carry out all the tasks at hand. They have decided to form a media committee, a schools committee and a business committee.

Three flipcharts, three felt pens

- Divide participants into three small groups and designate each group as one of these committees. The committee will have approximately 70 minutes to develop a plan of action.
- Indicate that the media committee should address itself to the following areas: (These instructions can be noted on a flipchart).
- Outline a set of specific plans on how to raise the awareness of this neighbourhood about the general problem of impaired driving, keeping in mind the following questions:
 - Who is (are) the target(s) of this campaign?
 - What media will be used? (you have a very limited budget)
 - Over what period of time will the various messages be presented?
 - Are there any other individuals whose input should be sought (e.g. interviews with members of MADD – Mothers Against Drunk Drivers or SADD – Students Against Drunk Drivers)?
- Indicate that the schools committee should address itself to the following areas:
- Outline a set of specific plans for presenting material on impaired driving in the schools, keeping in mind the following questions:
 - Toward which age group(s) should the information be targeted?
 - What type of information should be presented?
 - How should it be presented (film, lecture, small group discussion, etc.)?

- How should the school system be approached?
- Indicate that the business committee should address itself to the following areas:
- Outline a set of specific plans for involving the business community in this preventive effort keeping in mind the following questions:
 - What suggestions might be made to hotel/restaurant/bar owners concerning the role they might play in reducing the impaired driving problem in this neighbourhood?
 - How might they be approached (directly, through service clubs, through Chamber of Commerce, through the local hospitality association)?
 - What suggestions might be made to businesses concerning office or Christmas parties? How might the general business community be reached (perhaps different strategies might be required for small businesses and for large businesses, if there are any in this neighbourhood)?
- Point out that groups can write out their plans on a flipchart for presentation to the other groups upon completion of the discussions. Ask each group to designate a reporter who will be responsible for making this presentation.

15 minutes

3. BREAK

40 minutes

4. Groups Share Plans

- Ask the reporters from each group to present the plans developed by their respective committees. Allow time for members of the “committees” to question and comment upon each other’s plans.
- Ask participants whether they have ever been involved in a community mobilization effort in which several committees or task forces were set up to deal with various issues. What was the committee structure? What were the tasks of the various committees? How were members recruited to these committees? Who chaired the committee? How did its work tie in with the work being undertaken by other committees? What was the communication network?

10 minutes

5. Summary Presentation

- Inquire as to whether there are any questions about the material presented in this module.
- Summarize the key points:
 1. Community mobilization is a process of engaging members of a community in taking action around key issues that affect their lives.
 2. Prevention workers must first clarify the nature of the community with which they will be engaged. There are two major types of communities: geographic communities and functional communities. A geographic community refers to the people in a specific geographic area. A functional community refers to a group of people who share a common characteristic or interest.
 3. Prevention workers as community mobilizers must gain the trust of the community. They can do this by learning about the community, becoming involved in community life, talking with community members and following protocol.
 4. After “tuning in” to a community, key actors must be identified. Individuals representing both formal and informal organizations and networks should be considered.
 5. A meeting of those identified as key actors should be arranged in order to clarify how these individuals define the problems at hand and how they feel these problems should be addressed.

6. The group should then focus upon a specific problem and develop plans for what they might do to deal with this problem. Several committees or task forces may have to be established. It is essential, however, that communication among them be maintained.

7. The group of key actors should also keep in touch with members of the large community to provide them with information as well as to motivate them to become involved in the preventive effort.

Visual #17: "Mobilizing a community"

- Show visual #17 which summarizes the major steps in the community mobilization process.

"Community Mobilization", Monograph 2

6. Follow-up Assignment

- Read "Community Mobilization", Monograph 2.

30 minutes

Program Evaluation Form

7. Feedback Session

- Distribute Program Evaluation Form which participants are to complete and hand back to the instructor. If any time remains, lead a discussion asking for participants' comments regarding Unit B.

Module 1: Program Planning

PURPOSE

The purpose of this module is to provide participants with an understanding of the key steps which should be taken when planning a prevention program. These steps include assessing the need for a preventive effort, selecting an appropriate strategy based on the need, identifying the goals and objectives of the effort, and determining the specific activities which must be undertaken to achieve these goals and objectives.

RATIONALE

The success of a preventive effort depends largely upon how well it was planned. Clearly stated goals and objectives should guide the entire effort and should act as the basis upon which evaluation is conducted.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. identify five methods of assessing needs;
2. name at least three factors that might influence the selection of a prevention strategy;
3. explain how to go about setting goals for a prevention effort;
4. describe how a plan of action for a prevention program might be developed.

TIME

Day Ten A.M. – 3 1/2 hours

Day Ten P.M. – 2 hours 40 minutes

TOTAL – 6 hours 10 minutes

MATERIALS/EQUIPMENT

“Program Planning”, Monograph 3
 Handout #21: “Learning Objectives: Unit C, Module 1”
 Handout #22: “Checklist for Objectives”
 Visual #18: “Program Planning”
 Overhead projector
 Flipchart
 Felt pen
 Four large sheets of paper
 Four felt pens
 Masking tape

30 minutes

Flipchart, felt pen

1. Introductory Presentation

- Welcome participants. Explain that the purpose of this module is to provide them with an understanding of the key steps which must be taken when planning a prevention program. These steps include assessing the need for a prevention effort, selecting an appropriate strategy based on the need, identifying the goals and objectives of the effort, and determining the specific activities which must be undertaken to achieve these goals and objectives. Jot down these steps on a flipchart.

Handout #21: “Learning Objectives: Unit C, Module 1”

- Distribute Handout #21 which outlines the learning objectives of this module. Read aloud each objective.

- Indicate that the process of needs assessment will first be considered. Lead a group discussion asking participants to think of as many possible ways that they can identify key drug-related problems: (1) in a particular geographic community such as their own neighbourhood and (2) in a functional community such as 13-year-olds in a particular geographic community. Possible methods may include talking with individuals, observing behaviour, or reading local newspapers. Participants' ideas can be noted on a flip-chart. Participants should be encouraged to think of as many different ideas as they can. Point out that they need not worry about the feasibility or costs of the assessment method they propose at this stage.

40 minutes

“Program Planning”, Monograph 3

2. Presentation on Needs Assessment

- Present the material on pages 5 to 7 of “Program Planning”, Monograph 3 about the various methods of assessing needs.

40 minutes

3. Dyads Practise Key Informant Method

- Indicate that participants will now have an opportunity to practise one of the key methods of data collection described in the previous presentation: the key informant method. Divide participants into dyads. Explain that because the key informant technique involves interviewing or surveying individuals who are considered to be knowledgeable in certain designated subject areas, participants will be asked to simulate a key informant interview.
- Ask one member of the dyad to play the role of the prevention worker and the other to play the role of community member. In the first simulation, the prevention worker is interested in finding out about the key drug-related problems in a given geographic community. One of the individuals with whom he or she has decided to meet is a local police officer who patrols the neighbourhood. In the second simulation, the prevention worker is interested in determining the key drug-related problems prevalent in a functional community (13-year-olds). One of the individuals he or she has decided to interview is a 13-year-old president of the students' council of one of the local junior high schools. The purpose of this interview is to determine the student's assessment of the key drug-related problems seen amongst his or her peers.
- Ask participants to concentrate on the first interview between the prevention worker and the police officer. Allow approximately 10 minutes for the “prevention worker” and the “police officer” to plan what they will say during the interview. The prevention worker should jot down a list of questions that he or she may want to ask. The police officer should do some thinking about what he or she considers to be the key drug-related problems in that community. The police officer should also do some thinking about possible solutions or prevention strategies.
- After the planning period, allow participants approximately 30 minutes to act out this scenario. Indicate that the two parties they are playing have only spoken to each other briefly on the phone prior to this meeting. This, then, is a “formal” meeting and self-introductions will be required. The prevention worker is free to refer to the list of questions prepared during the planning period and can make notes during the interview if desired. The police officer can refer to any hypothetical reports or data to support his or her argument. Indicate that at the conclusion of the interview, the prevention worker should attempt to summarize the discussion in order to ensure that he or she has correctly understood the other party and to review the key points raised during the meeting.

15 minutes

4. BREAK

40 minutes

Instructional Plan: A.M.

Table 22

HOUR	TIME	FORMAT	MATERIALS
9:00-9:30	30 minutes	Introductory Presentation	Handout #21 Flipchart Felt pen
9:30-10:10	40 minutes	Presentation on Needs Assessment	Monograph 3
10:10-10:50	40 minutes	Dyads Practise Key Informant Method	
10:50-11:05	15 minutes	Break	
11:05-11:45	40 minutes	Dyads Practise Key Informant Method	
11:45-12:30	45 minutes	Presentation on Program Planning	Monograph 3

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: P.M.

Table 23

HOUR	TIME	FORMAT	MATERIALS
1:30-2:20	50 minutes	Small Group Activity on Selecting Strategy	Flipchart Felt pen
2:20-2:40	20 minutes	Presentation on Developing Plans of Action	Monograph 3
2:40-3:40	60 minutes	Small Group Activity on Setting Objectives & Plans of Action	Four large sheets of paper Four felt pens Masking tape Handout #22
3:40-3:55	15 minutes	Summary Presentation	Visual #18 Overhead projector
3:55-4:10	15 minutes	Break	
4:10-5:00	50 minutes	Begin Module 2	

TOTAL 210 minutes
 (3 1/2 hours)

5. Dyads Practise Key Informant Method

- Ask participants to switch roles. Allow the “prevention worker” and the “student” approximately 10 minutes to prepare for the interview.
- Allow participants approximately 30 minutes to conduct this needs assessment interview. Indicate that once again they are free to refer to the notes that they made during the planning period and to take notes during the interview. Point out again that at the end of the meeting the prevention worker should try to summarize the key points discussed.

45 minutes

“Program Planning”, Monograph 3

6. Presentation on Program Planning

- Present the material on page 8 of “Program Planning”, Monograph 3 about selecting the problem focus.
- Ask participants how they might proceed in selecting a prevention strategy once they have identified the problem focus.
- Present the material on pages 8 and 9 of “Program Planning”, Monograph 3 about selecting the prevention strategy.
- Explain that after the lunchbreak, participants will have an opportunity to practise selecting strategies and identifying objectives and activities for selected prevention strategies.

LUNCH

50 minutes

1. Small Group Activity on Selecting Strategy

- Indicate that participants will now have an opportunity to practise selecting prevention strategies once a problem focus has been identified.

Flipchart, felt pen

- Divide participants into two groups. Explain that the members of each group are to consider themselves as a team of prevention workers. A problem focus will be assigned to each group. Participants must determine which strategy would be most appropriate for that problem focus. They are to consider each of the four prevention strategies – influence, control, competence development, and environmental design – in relation to problem focus assigned to their group. They should discuss what type of preventive approach might be developed using each of the four prevention strategies. They should also consider the advantages and disadvantages of each approach. They should then try to arrive at a decision on what might be the most appropriate strategy (or strategies if a combination is to be used) to respond to the identified problem. Jot down these points on a flipchart so that participants may refer to them during their discussions.
- Provide an example. Prevention workers may have learned as a result of the needs assessment conducted in a geographic community that the key concern in that neighbourhood is the high incidence of impaired driving. In examining which prevention strategy might be appropriate to address this problem, the group may consider the following options. An influence program may be developed which informs members of the public about the hazards of drinking and driving. Employing the control strategy might entail lobbying for harsher penalties for impaired drivers and for stricter enforcement of these penalties. They may decide that a more effective approach would be to hold competence development programs in which bartenders are taught to refuse serving customers who are drinking too heavily and to arrange a ride home for these customers. An environmental design program might entail making cars and driving more safe so that the damage that might result from an impaired driving accident would be minimized.
- Assign problem focus #1 to one group and problem focus #2 to the other group.

Problem Focus #1: As a result of the needs assessment process, it was determined that the key problem focus that will be addressed is the fact that adolescents are using drugs out of curiosity and boredom.

Problem Focus #2: As a result of needs assessment, the key problem focus to be addressed is the easy availability of alcohol and drugs in the local community.

- Emphasize again that each group should consider each of the four major prevention strategies in relation to the problem focus assigned to them in order to determine the most appropriate preventive action in this situation. Some strategies may be less appropriate or feasible than others. Ask each group to choose a recorder so that a brief report can be made after the discussion.
- Allow groups approximately 35 minutes for this discussion.
- Lead a brief discussion in which participants share their answers with the entire group.

20 minutes

2. Presentation on Developing Plans of Action

“Program Planning”, Monograph 3

- Present the material on pages 10 to 12 of “Program Planning”, Monograph 3 about developing plans of action.

60 minutes

3. Small Group Activity on Setting Objectives and Plans of Action

- Point out that the final learning activity in this module will focus upon program objectives and activities. Divide participants into four groups. Each group will be assigned a prevention strategy based upon which they are to identify three possible objectives of such a prevention effort and at least five activities that would have to be undertaken to achieve these objectives.
- Assign one of the prevention efforts outlined below to each group (each group should discuss a different prevention effort).

Prevention Effort #1: An influence strategy will be undertaken in order to inform the general public about the hazards of drinking and driving. The overall goal of this prevention effort is to reduce the numbers of accidents caused by impaired drivers.

Prevention Effort #2: The overall goal of this prevention effort is to reduce the availability of alcohol; the control strategy will be used.

Prevention Effort #3: A competence development strategy has been selected in order to achieve the overall goal of this prevention effort: to improve adolescents' skills in resisting peer pressure when they are approached to take drugs.

Prevention Effort #4: An environmental design strategy has been selected in order to achieve the goal of this prevention effort: to make the school environment more meaningful for students in a selected high school.

Four large sheets of paper

Four felt pens

Masking tape

- Attach a large sheet of paper to the wall beside each group. Ask one participant from each group to make four columns entitled: “strategy”, “goal”, “objectives” and “activities”. They should fill in the strategy and goal that have been assigned to their group. They should then attempt to identify three objectives and at least five activities that would have to be undertaken to meet the stated goal.

Beside each activity, groups should assign a number from 1 to 5 (or more if more than five activities have been identified). These numbers are to represent the order in which the identified activities are to be carried out. If two or more activities can be undertaken concurrently, then the same number should be assigned to both these activities. For example, obtaining funds would have to be done before hiring staff. These two activities would be assigned the num-

bers 1 and 2 respectively. However, developing messages for the media and obtaining a list of media resources could be done at the same time (if staff resources allow). These two activities, then, would both be assigned the number 3.

Handout #22: "Checklist for Objectives"

- Before groups begin their discussion, distribute Handout #22 which summarizes the key points to keep in mind when setting objectives. Read aloud each point. Indicate that participants should refer to these guidelines when formulating their objectives.
- Allow groups approximately 40 minutes for this discussion.
- After the allocated time, ask one member from each group to make a 5-minute presentation summarizing the group's discussion.
- Inquire as to whether there are any questions about the material presented in this module.

15 minutes

4. Summary Presentation

- Present the highlights from this module:
 1. Needs assessment is important because it provides a broad base of input for definition of the problem. Five major types of needs assessment are: key informant technique; the community survey; demographic analysis; direct and indirect indicators; program data.
 2. The data collected must then be analyzed. Data may have to be edited, coded and tabulated. Two major types of analysis are content analysis and statistical analysis.
 3. A problem focus must be selected. This is done by identifying all the problem areas that emerge from the needs assessment. Problem statements are formulated by breaking down problems into statements of single issues.
 4. The selection of a prevention strategy depends upon the way in which the problem has been defined. One method of selecting a strategy is to consider the appropriateness of each of the four major prevention strategies: influence, control, competence development, and environmental design.
 5. Other factors which influence the selection of strategy include prevention workers' mandate, sources of support and resources.
 6. When the key problem statement has been identified, it must be translated into a goal. Goal statements are broken down into measurable objectives. Objectives are the accomplishments this effort expects to attain. They should include details about the target group, geographical boundary and time-frame.
 7. Specific activities to be undertaken are determined. Time estimates should be assigned to each activity. The activities to be accomplished are set out in a logical order. A visual plan can also be prepared for clarifying in graphic form which activities should be carried out sequentially or concurrently. The length of time required for carrying out each activity can also be indicated.

Visual #18: "Program Planning", overhead projector

- Show Visual #18 which depicts the key stages in planning a prevention program.
- Inquire as to whether there are any questions about the material in this module.

15 minutes

5. BREAK

6. Begin Module 2.

Module 2: Program Management

PURPOSE

The purpose of this module is to provide participants with an understanding of the key steps which must be taken to launch a preventive effort and to ensure its continued success. These steps include establishing a working agreement; obtaining resources; monitoring and stabilizing the preventive effort.

RATIONALE

A working agreement that is clearly understood by all parties minimizes the possibility of confusion and enhances the likelihood that the preventive effort will be successfully launched and carried out. Being able to identify what types of resources are required and knowing where to obtain these are essential to the implementation of a prevention effort. Finally, the progress of the effort cannot be left to "chance" alone. All aspects of the prevention program, including work performance and the use of time and resources, must be monitored on a regular basis to ensure that it is being carried out both effectively and efficiently.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. define what is meant by a working agreement;
2. name at least four kinds of resources that may be required for a prevention effort;
3. state where these resources may be obtained;
4. describe at least four actions that might be taken to stabilize a prevention effort.

TIME

Day Ten P.M. – 50 minutes

Day Eleven A.M. – 2 hours

TOTAL – 2 hours 50 minutes

MATERIALS/EQUIPMENT

"Program Management", Monograph 3
Handout #23: "Learning Objectives: Unit C, Module 2"
Learning Activity #20: "Obtaining Resources"
Visual #19: "Program Management"
Overhead projector
Flipchart
Felt pen

FOLLOW-UP ASSIGNMENT

Read "Program Planning" and "Program Management", Monograph 3.

50 minutes

1. Presentation on Working Agreements and Resources

- Indicate to participants that the completion of today's session and the beginning of tomorrow's session will focus upon program management. Explain that the purpose of this module is to provide participants with an understanding of the key steps which must be taken to launch a preventive effort and to ensure its continued success. These steps include establishing a working agreement; obtaining resources; monitoring and stabilizing the prevention effort.

Handout #23: "Learning Objectives: Unit C, Module 2"

Instructional Plan: P.M.

Table 24

HOUR	TIME	FORMAT	MATERIALS
1:30-4:10	160 minutes	See Module 1	
4:10-5:00	50 minutes	Presentation on Working Agreements and Resources	Handout #23 Monograph 3 Flipchart Felt pen

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: A.M.

Table 25

HOUR	TIME	FORMAT	MATERIALS
9:00-9:45	45 minutes	Individual Learning Activity on Resources	Handout #23 Learning Activity #20 Flipchart Felt pen
9:45-10:30	45 minutes	Presentation on Monitoring and Stabilization	Monograph 3
10:30-10:45	15 minutes	Summary Presentation	Visual #19 Overhead projector
10:45		Follow-up Assignment	Monograph 3
10:45-11:00	15 minutes	Break	
11:00-12:30	90 minutes	Begin Module 3	

TOTAL 210 minutes
 (3 1/2 hours)

- Distribute Handout #23 which outlines the learning objectives of this module. Read aloud each objective.
- Ask participants what they think is meant by establishing a working agreement. What is the need for such an agreement? What information should be included in a working agreement?

“Program Management”, Monograph 3

- Present the material on pages 15 and 16 of “Program Management”, Monograph 3 about establishing a working agreement.

Flipchart
Felt pen

- Indicate that while negotiating a working agreement, prevention workers must also consider what resources may be required for a prevention effort. Ask participants to identify what type of resources might be needed for any kind of prevention effort. Jot down these ideas on a flipchart. Beside each resource identified, ask participants where or how they might obtain such a resource.

“Program Management”, Monograph 3

- Present the material on pages 16 and 17 of “Program Management”, Monograph 3 about obtaining resources.
- Indicate that during tomorrow’s session, participants will be asked to complete a learning activity on identifying and obtaining resources. The subjects of monitoring and stabilizing the prevention effort will also be considered during tomorrow’s session.
- Inquire as to whether there are any questions about the material presented in this afternoon’s session on establishing a working agreement and on obtaining resources.

45 minutes

Day Eleven

Handout #23: “Learning Objectives: Unit C, Module 2”

2. Individual Learning Activity on Resources

- Welcome participants. Explain that this morning’s session will be devoted to the completion of Module 2 and to the beginning of Module 3. Review the objectives of Module 2 by reading aloud each objective on Handout #23.
- Point out that as a follow-up to yesterday’s presentation on identifying and obtaining resources to be used for a prevention effort, participants will now be asked to complete a learning activity on this subject.

Learning Activity #20: “Obtaining Resources”

- Distribute Learning Activity #20 which participants are to complete on an individual basis. Participants are to consider themselves as the coordinator of a prevention program which involves employing the mass media to inform the public about the hazards of excessive alcohol use. Participants should write down in the first column at least three types of resources they may require to undertake this effort. In the second column, they should state for what purpose this resource would be required. Finally, in the third column, they should indicate where these resources may be obtained or sought.

Flipchart
Felt pen

- Allow participants approximately 30 minutes to complete this learning activity.
- Draw three columns on a flipchart which correspond to the columns in Learning Activity #20. After the allocated time period, ask participants to share their answers. Jot down these ideas on the flipchart. Resources could include, for example:

Resource	Why Needed	Where Obtained
Staff	<ul style="list-style-type: none"> ● to find out about similar projects in other communities ● to conduct research on this subject area ● to investigate various media possibilities and prices ● to prepare media messages 	<ul style="list-style-type: none"> ● help wanted ads in newspaper, personal reference
Space	<ul style="list-style-type: none"> ● to do research, typing, preparation of local community centre 	
Funds	<ul style="list-style-type: none"> ● to pay for staff, media messages, materials such as paper and postage 	<ul style="list-style-type: none"> ● sponsoring organization, government department of health or of transportation

45 minutes

3. Presentation on Monitoring and Stabilization

“Program Management”, Monograph 3

- Present the material on page 18 of “Program Management”, Monograph 3 which discusses monitoring the progress of the effort and the use of resources.
- Remind participants that in Module 1 of Unit B, stabilization of the change process was identified as one of the key steps in effecting change in a system. Ask participants to think of some of the specific actions that a prevention worker might take in an attempt to stabilize a prevention effort.

“Program Management”, Monograph 3

- Present the material on pages 18 and 19 of “Program Management”, Monograph 3 which discusses the stabilization of a prevention effort as well as the termination of prevention workers’ involvement in the effort.

15 minutes

4. Summary Presentation

- Summarize the key points with respect to the planning, implementation, and monitoring of a prevention effort.
1. Program management refers to a set of activities that involve launching a prevention effort and ensuring its continuity. This includes establishing a working agreement, obtaining the required resources, monitoring all aspects of the project, and stabilizing the effort.
 2. Establishing a working agreement means setting up a mutually agreed upon plan of action identifying who does what within certain designated periods of time. Working agreements can be made between prevention workers and members of the target group; prevention workers and supervisors; prevention workers and staff members involved in the prevention effort. Such agreements should identify the responsibilities of all parties with respect to activities, time-frames and accountability. A working agreement should be prepared in writing so that both or all parties to the agreement are clear as to what is expected of them.
 3. A second important aspect of launching a prevention effort is identifying and obtaining the resources that may be required. Such resources include personnel, funds, space, equipment and materials.
 4. Monitoring a prevention effort is important to ensure: (1) that the project is being carried out within the allocated time and resources and (2) that the work performance is of high quality. In addition to monitoring present progress, prevention workers should also keep in mind the resources that may be required in the future and should take steps toward obtaining these.

5. Another important aspect of planning involves stabilizing the prevention effort. This refers to actions which must be taken to ensure that the positive changes, activities, and gains made will be maintained after the prevention worker is no longer involved in the effort. Such activities include enhancing the competence and confidence of the community members who will be carrying on the effort; ensuring that the group's structure and procedures are stable enough to deal with the tasks that lie ahead; providing information as to where resources and information may be obtained; helping the group clarify and consider its relationship to the wider community; determining the extent to which the prevention worker will be available for consultation or assistance after withdrawal from the project.

Visual #19: "Program Management", overhead projector

- Show Visual #19 which summarizes the key aspects of program management.
- Inquire as to whether there are any questions about the material presented in this module.

5. Follow-Up Assignment

"Program Planning", "Program Management", Monograph 3

- Instruct participants to read "Program Planning" and "Program Management", Monograph 3.

15 minutes

6. BREAK

7. Begin Module 3.

Module 3: Personnel Management

PURPOSE

The purpose of this module is to provide participants with an understanding of the major aspects of personnel management: recruitment of staff or volunteers, orientation and training, supervision, and performance appraisal.

RATIONALE

Because human resources are the most essential component of any successful prevention effort, prevention workers must pay particular attention to the various aspects of effective personnel management.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. describe at least five methods of recruiting personnel.
2. identify the purpose of orientation and describe the areas that might be covered.
3. describe the three major components of supervision.
4. explain how the process of job appraisal might be undertaken.

TIME

Day Eleven A.M. – 1 1/2 hours

Day Eleven P.M. – 3 1/2 hours

TOTAL – 5 hours

MATERIAL/EQUIPMENT

“Personnel Management”, Monograph 3
Handout #24: “Learning Objectives: Unit C, Module 3”
Learning Activity #21: “Recruiting Personnel”
Learning Activity #22: “Supervision”
Skills Assessment Form #2
Visual #20: “Supervision”
Overhead projector
Flipchart
Felt pen

FOLLOW-UP ASSIGNMENT

Read “Personnel Management”, Monograph 3

20 minutes

1. Presentation on Personnel Management

- Welcome participants. Explain that the purpose of this module is to provide them with an understanding of the major aspects of personnel management: recruitment of staff or volunteers, orientation and training, supervision, and performance appraisal.

Handout #24: “Learning Objectives: Unit C, Module 3”

- Distribute Handout #24 which outlines the learning objectives of this module. Read aloud each objective.
- Ask participants why they think it would be important for prevention workers to learn about the various aspects of personnel management. Point out that if more than one staff person or volunteer is required to

Instructional Plan: A.M.

Table 26

HOUR	TIME	FORMAT	MATERIALS
9:00-11:00	120 minutes	See Module 2	
11:00-11:20	20 minutes	Presentation on Personnel Management	Handout #24 Flipchart Felt pen
11:20-11:50	30 minutes	Individual Learning Activity on Personnel Recruitment	Learning Activity #21 Monograph 3
11:50-12:15	25 minutes	Small Group Discussion on Orientation and Training	Flipchart Felt pen
12:15-12:30	15 minutes	Presentation on Training	Monograph 3

TOTAL 210 minutes
 (3 1/2 hours)

Instructional Plan: P.M.

Table 27

HOUR	TIME	FORMAT	MATERIALS
1:30-2:15	45 minutes	Individual Learning Activity on Supervision	Learning Activity #22
2:15-2:45	30 minutes	Presentation on Supervision	Monograph 3
2:45-3:00	15 minutes	Break	
3:00-4:30	90 minutes	Dyads Practise Supervision	Skills Assessment Form #2
4:30-4:45	15 minutes	Presentation on Performance Appraisal	Monograph 3
4:45-5:00	15 minutes	Summary Presentation	Visual #20 Overhead projector
5:00		Follow-up Assignment	Monograph 3

TOTAL 210 minutes
 (3 1/2 hours)

implement a prevention effort, prevention workers will likely have the responsibility for recruiting, training, supervising, and appraising performance of all the personnel involved in the effort.

Flipchart
Felt pen

- Explain to participants that before any information is presented about managing personnel, participants will be asked to identify what they already know about managing personnel. Ask participants to think about the director of their employing organization or their supervisor. What are the tasks that they must carry out in relation to the personnel? Answers might include: hiring qualified staff people; assigning tasks; monitoring work performance; training staff; managing benefits.

30 minutes

2. Individual Learning Activity on Personnel Recruitment

- Point out that the first aspect of personnel management to be considered is the recruitment of personnel. Participants will have an opportunity to consider some of the possible methods of recruiting staff or volunteers to assist in a prevention effort.

Learning Activity #21: "Recruiting Personnel"

- Distribute Learning Activity #21 in which participants are asked to consider themselves as prevention workers who will be heading up a prevention project employing the competence development strategy. They are going to have to recruit two individuals to teach problem-solving skills to public school students. They should indicate on Learning Activity #21 the recruitment sources that they would tap to seek out such individuals.
- Allow participants approximately 20 minutes for completion of this learning activity.

"Personnel Management", Monograph 3

- Present the material on pages 21 and 22 of "Personnel Management", Monograph 3 which discusses various aspects of personnel recruitment.

25 minutes

3. Small Group Discussion on Orientation and Training

- Indicate that the next aspect of personnel management that will be considered is training and orientation.
- Divide participants into small groups (approximately three per group). Ask all participants to think about paid or volunteer employment in which they recently have been engaged. They should consider, in particular, what type of orientation was provided when they assumed this position. Did it involve formal sessions or informal discussion with supervisors and co-workers? Was it conducted in groups or on an individual basis? What type of training was provided at the outset? What type of ongoing training was or is provided? Are there in-house programs set up by the sponsoring agency or community programs organized by local agencies, colleges or universities? What type of training do you think you may need but have not been able to take? Why have you not been able to have this training: lack of time, funds, or expertise in this area? These guidelines for discussion can be jotted down on a flipchart to help participants remember these questions.
- Ask each participant to jot down some brief notes (allow approximately 15 minutes) in response to these questions. Each participant will then have approximately 5-7 minutes to share this information with the other members of the group. Other members are free to comment or ask for clarification.

15 minutes

"Personnel Management", Monograph 3

4. Presentation on Training

- As a follow-up to the discussions held on orientation and training, present the material on pages 22 and 23 of “Personnel Management”, Monograph 3 about the orientation and training of workers.

LUNCH

45 minutes

5. Individual Learning Activity on Supervision

- Explain to participants that the third major aspect of personnel management to be considered is supervision. Indicate that before any material is presented about supervision, participants will first consider their own experience with respect to supervision. This experience could be any paid or volunteer employment or a student placement. Participants will be asked to work on an individual basis to complete Learning Activity #22, which encourages them to think about their own supervisory experiences and what supervisory behaviours they found to be helpful.

Learning Activity #22: “Supervision”

- Distribute Learning Activity #22. Allow approximately 30 minutes for completion of this learning activity.
- Lead a discussion in which participants share their answers to the questions on the learning activity.

30 minutes

“Personnel Management”, Monograph 3

6. Presentation on Supervision

- Present the material on pages 23 to 25 of “Personnel Management”, Monograph 3 which discusses the three major components of supervision: administrative supervision, educational supervision, and supportive supervision.

15 minutes

7. BREAK

90 minutes

8. Dyads Practise Supervision

- Explain that participants will now have an opportunity to simulate a supervisory session in which one member of the dyad will play the role of the supervisor and the other will play the role of the prevention worker. Ask participants to break up into dyads and to choose between themselves who will play the role of the supervisor first. Before the actual supervisory session takes place, participants will have approximately 5 minutes to plan how they will play these roles. They should plan their simulation around the following scenario. The prevention worker has been involved in a prevention effort in which drug information presentations are being made to grade 4 students in public schools throughout the city. To date, half of the designated classes have been reached and the project is proceeding on schedule. However, the teachers who completed a questionnaire after the most recent presentation indicated that the delivery itself was good but the level of the material appeared to be too advanced for the students. The teachers recommended that the content be revised. The prevention worker is concerned about these results and is unsure how to proceed at this point as none of the teachers in the five other schools that were visited to date had made this comment. The prevention worker has mentioned this concern to the supervisor and has asked that this situation be discussed at the next supervisory session.

Skills Assessment Form #2

- Indicate that after the simulation both members of the dyad will be asked to complete Skills Assessment Form #2 about the performance of the supervisor. Distribute Skills Assessment Form #2 and read aloud. Inquire as to whether there are any questions about the completion of this Form.
- Allow participants approximately 30 minutes for this simulation. After the supervisory session, allow another 10 minutes for participants to complete and discuss Skills Assessment Form #2 about the effectiveness of the supervisor's performance.
- Ask participants to switch roles. Allow them 5 minutes to plan for the following scenario. The prevention worker has been asked by the management of a large corporation to develop a communication skills program in the company. Management feels that if communication within the organization was improved, workers would feel a greater sense of loyalty to the company. As a result, they may engage less frequently in certain behaviours (such as the excessive use of alcohol) that are detrimental both to productivity and to the image of the corporation. The prevention worker has just had a meeting with the management and union, at which time management presented the proposal to the union. The union representatives were skeptical about the program and were suspicious of company motives. They feared that management might use these communication sessions as a way to find out about employees' personal problems and use this information to block promotions or transfers. The union representatives indicated that they would have to call a general meeting of the membership to gain its approval before they could support the effort. Organizing a membership meeting takes about two to three weeks. The prevention worker is wondering what steps he or she should take, if any, at this point. The worker is also concerned about the delay that this situation will create. The prevention worker is also unsure about what to do over the next few weeks as he or she has been assigned to work exclusively on this project.

Skills Assessment Form #2

- Allow 30 minutes for the supervisory session and a 10-minute follow-up discussion in which participants should complete and discuss Skills Assessment Form #2 about the effectiveness of the supervision.

15 minutes

"Personnel Management", Monograph 3

9. Presentation on Performance Appraisal

- Indicate that the last aspect of personnel management to be considered is performance appraisal.
- Present the material on pages 25 and 26 of "Personnel Management", Monograph 3 about performance appraisal.

15 minutes

10. Summary Presentation

- Summarize the key points with respect to personnel management.
 1. Before recruiting personnel to become involved in a preventive effort, the job for which the individual is being sought should be analyzed. This involves identifying the job to be accomplished, determining the tasks, duties, and responsibilities inherent in the job, and ascertaining the knowledge and skills that would be required by the individual. A job description should be prepared on the basis of this analysis.
 2. Recruitment methods include internal promotion, employee reference, applicant files, advertising, employment agencies, and campus billboards. A job interview should then be held with potential candidates.
 3. The selected candidate must proceed through a period of orientation. Its purpose is to provide the new employee with information about the nature of the job, the history and objectives of the employing organization, the rules and regulations guiding behaviours, the name of supervisors, and the roles of colleagues.
 4. Training may be required before the individual assumes a position and at various points in time throughout the preventive effort. Training options include seminars or training programs offered by the employing organization; courses offered by local colleges and universities; individualized training.

5. One of the most important aspects of personnel management is supervision. There are three major components to the role of the supervisor: administrative supervision, educational supervision, and supportive supervision.

Visual #20: "Supervision", overhead projector

- Show Visual #20 which depicts these three components of the supervisory role.

6. Job appraisal can be defined as the objective assessment of the worker's total functioning on the job over a specified period of time. It has a number of purposes, the most important of which is to provide feedback to workers about their performance. It serves as the basis for modifying behaviour toward more effective functioning on the job. Assessment also helps identify the areas in which training may be required.

- Inquire as to whether there are any questions about the material presented in this module.

11. Follow-up Assignment

"Personnel Management" Monograph 3

Read "Personnel Management", Monograph 3.

Module 4: Evaluation

PURPOSE

The purpose of this module is to provide participants with an understanding of the process of evaluation.

RATIONALE

Evaluation is essential in order to determine whether a program is being carried out effectively and efficiently.

LEARNING OBJECTIVES

Upon completion of this module, participants should be able to:

1. identify the three aspects of a program upon which an evaluation may focus;
2. explain what is meant by a case design, a time series design, and a comparison group design;
3. design an evaluation using one of the above methods;
4. describe at least three types of evaluation instruments.

TIME

Day Twelve A.M. – 3 1/2 hours

MATERIALS/EQUIPMENT

“Evaluation”, Monograph 3
Handout #25: “Learning Objectives: Unit C, Module 4”
Visual #21: “Evaluation Focus”
Visual #22: “Case Design”
Visual #23: “Time Series Design”
Visual #24: “Comparison Group Design”
Overhead projector
Program Evaluation Form
Three flipcharts
Three felt pens
Refreshments (optional)

FOLLOW-UP ASSIGNMENT

Read “Evaluation”, Monograph 3.

30 minutes

Presentation on Evaluation

- Welcome participants. Explain that the purpose of this module is to provide them with an understanding of the process of evaluation. Point out that despite the fact that this subject is being considered in the final module of this training program, its placement is, by no means, a reflection of its importance. Evaluation is not a process that should be thought about at the end of a prevention effort. Rather, planning for evaluation should begin in the early developmental stages of a prevention effort. Ideally, the monitoring and evaluation of an effort should take place throughout its duration as well as upon its completion.

Handout #25: “Learning Objectives: Unit C, Module 4”

- Distribute Handout #25 which outlines the learning objectives of this module. Read aloud each objective.
- Ask participants to identify the purpose of an evaluation. Inquire as to whether any of them has ever been directly or indirectly involved in designing or carrying out an evaluation of a prevention program. Ask

them to describe this effort by identifying the steps that they took to develop and implement the evaluation.

30 minutes

“Evaluation”, Monograph 3

2. Presentation on Evaluation

- Present the material on pages 28 to 31 of “Evaluation”, Monograph 3 about the major components upon which an evaluation may focus.

Visual #21: “Evaluation Focus”, overhead projector

- Show Visual #21 which depicts these concepts.

15 minutes

3. BREAK

30 minutes

Monograph 3

4. Presentation on Research Design

- Present the material on pages 32 to 37 of “Evaluation”, Monograph 3, about three major types of research design.

Visual #22: “Case Design”

Visual #23: “Time Series Design”

Visual #24: “Group Comparison Design”, overhead projector

- Show Visuals #22, 23 and 24 which visually depict these designs.

60 minutes

Three flipcharts, three felt pens

5. Small Group Learning Activity on Evaluation Design

- Divide participants into three small groups by selecting names from a hat (random assignment). Each group should be asked to consider a different evaluation design (i.e. group #1: case design, group # 2: time series design, group #3: comparison group design). Each group is to design an evaluation plan to assess the effectiveness of the training program. The small group is to consider the entire group of participants as the “experimental” group. The plan should include the following components:
 - How can the effectiveness of this training program be assessed using the research design assigned to your group?
 - What is to be assessed (participants’ knowledge, skills, subjective feelings etc.)?
 - How will these be assessed?

Each group can write down its plan on a flipchart. Allow groups approximately 45 minutes to develop their evaluation plans.

- Lead a discussion asking groups to share their plans.

5 minutes

Instructional Plan: A.M.

Table 28

HOUR	TIME	FORMAT	MATERIALS
9:00-9:30	30 minutes	Presentation on Evaluation	Handout #25
9:30-10:00	30 minutes	Presentation on Evaluation Focus	Monograph 3 Visual #21 Overhead projector
10:00-10:15	15 minutes	Break	
10:15-10:45	30 minutes	Presentation on Research Design	Monograph 3 Visuals #22 - 24 Overhead projector
10:45-11:45	60 minutes	Small Group Learning Activity on Evaluation Design	3 Flipcharts 3 Felt pens
11:45-11:50	5 minutes	Summary Presentation	
11:50		Follow-up Assignment	
11:50-12:30	40 minutes	Feedback Session; Wrap-up	Program Evaluation Form Refreshments (optional)

TOTAL 210 minutes
 (3 1/2 hours)

6. Summary Presentation

- Review the key points discussed in this module.
- Plans for evaluation should be developed as soon as a prevention program is undertaken.
- There are three major questions that are commonly asked about the performance of a program. These are:
 - What was done and why?
 - How well was it done?
 - Did it do any good?
- An evaluator wanting to find out what was done and why would look at the inputs to a prevention program. An evaluator wanting to find out how well a prevention program was carried out would look at the outputs. An evaluator wanting to find out whether a program did any good would look at its effects.
- Inputs refer to the personal and financial resources allocated to a particular program. These inputs are used to produce outputs. The output of a program is what is produced or delivered. The purpose of these products or services is to have an effect upon a specific problem.
- An assessment of program inputs is referred to as an evaluation of effort. An assessment of program outputs is referred to as an evaluation of process (one measure of which is efficiency). An assessment of program effects is referred to as an evaluation of effectiveness.
- An evaluation of effectiveness is the most important evaluation focus. A research design is required to determine how effective a particular program has been. Three major types of research design are case designs, time series designs and comparison group designs.
- In a case design, the individuals involved in a program are tested after the program takes place. In a time series design, the same participants are tested at least twice – once before the program and at least one more time after the program. The comparison group design involves testing the groups of individuals before a program takes place. Only one group is exposed, however, to the program. Both groups are tested after the program to determine what changes took place.
- This testing referred to in the three designs is conducted by means of data collection techniques. These techniques include performance tests, rating scales, observation, interviews and questionnaires.
- An evaluation report should be prepared which addresses the concerns of the audience and which clearly presents the results and recommendations.

“Evaluation”, Monograph 3

7. Follow-up Assignment

- Read “Evaluation”, Monograph 3

40 minutes

Program Evaluation Form

8. Feedback Session: Wrap-Up

- Distribute the Program Evaluation Form and allow participants approximately 20 minutes to complete this form.
- In the remaining time, lead a discussion asking participants for their comments as to what they feel they have learned and what areas of knowledge and skill they will be able to employ in their own work situations.

Refreshments (optional)

- The instructor and participants may wish to wrap-up the training program with an informal socialization session.

SECTION 3

TEACHING AIDS

Handouts

HANDOUT #1

OUTLINE OF PROGRAM CONTENT

UNIT A: ESSENTIAL CONCEPTS AND STRATEGIES

Module 1: Historical Perspectives

Module 2: Drug Use: an overview

Module 3: Prevention

Module 4: Prevention Strategies

Module 5: Contextual Factors

Module 6: Prevention Issues

UNIT B: CHANGE AGENT SKILLS

Module 1: The Change Process

Module 2: Volunteers

Module 3: Using the Media

Module 4: Presentations

Module 5: Networking

Module 6: Meetings

Module 7: Lobbying

Module 8: Community Mobilization

UNIT C: PROGRAM PLANNING AND IMPLEMENTATION

Module 1: Program Planning

Module 2: Program Management

Module 3: Personnel Management

Module 4: Evaluation

HANDOUT #2

LEARNING OBJECTIVES: UNIT A, MODULE 1

Upon completion of this module, participants should be able to:

IDENTIFY the five major perspectives on alcohol.

STATE how each perspective would explain alcohol-related problems.

STATE the solution(s) to these problems proposed by each perspective.

EXPLAIN how present-day policies and programs on alcohol have been influenced by these perspectives.

HANDOUT #3

LEARNING OBJECTIVES: UNIT A, MODULE 2

Upon completion of this module, participants should be able to:

NAME several ways in which the use of drugs has spread.

IDENTIFY at least five major categories of drug-related problems and provide an example of each type.

IDENTIFY the three major types of theory attempting to explain drug use and provide an example of each type.

PROVIDE at least three examples of factors that are positively correlated with drug use and at least three examples of factors that are negatively correlated with drug use.

HANDOUT #4

CORRELATES OF DRUG USE

Research has established both positive and negative correlations of drug abuse and attitudes and behaviours.⁵ Some examples are:

1. Drug abuse has been positively correlated with:

- Knowledge of drugs
- Attitudes towards use
- Intentions to use
- Use of other drugs
- Impulsivity
- Alienation
- Excessive personal stress
- Sensation seeking
- Boredom
- Assertiveness
- Anti-social tendencies
- Rejection
- Reliance on peer group for drug information
- Skepticism about school drug education programs
- Skepticism about media prevention efforts
- Peer approval of deviant behaviour
- Peer pro-drug attitudes and behaviours

- Parental use of drugs or alcohol

- Parental medication use
- Lack of parental concern
- Parental permissiveness
- Childhood stress and trauma
- Absence of a parent
- Family instability and disorganization
- Quality of the relationship in the family
- Over and under-domination by parents
- Harsh physical punishment
- Rejection by parents

2. Drug abuse has been negatively correlated with:

- Self-esteem
- Liking of school
- Grades and achievement
- Decision-making
- Self-reliance
- Feelings of belonging
- Religious beliefs
- Optimism about the future
- Humanistic environment in the school
- Alternate education programs for drop-outs and underachievers
- Involvement of community institutions in youth problems and programs
- Clear, consistent child-rearing practices
- Parent religiosity
- Parental intolerance of deviance
- Presence of controls and regulations in home
- Extended family

HANDOUT #5

LEARNING OBJECTIVES: UNIT A, MODULE 3

Upon completion of this module, participants should be able to:

PROVIDE at least five examples of preventive action that may be taken during the course of everyday living.

STATE the three major targets of preventive action.

IDENTIFY at least three components of each of these targets.

NAME and define the four major types of prevention strategies in the drug field.

IDENTIFY which strategy(ies) would have to be employed in order to change each of the three major targets.

HANDOUT #6

LEARNING OBJECTIVES: UNIT A, MODULE 4

Upon completion of this module, participants should be able to:

DESCRIBE the four major prevention strategies.

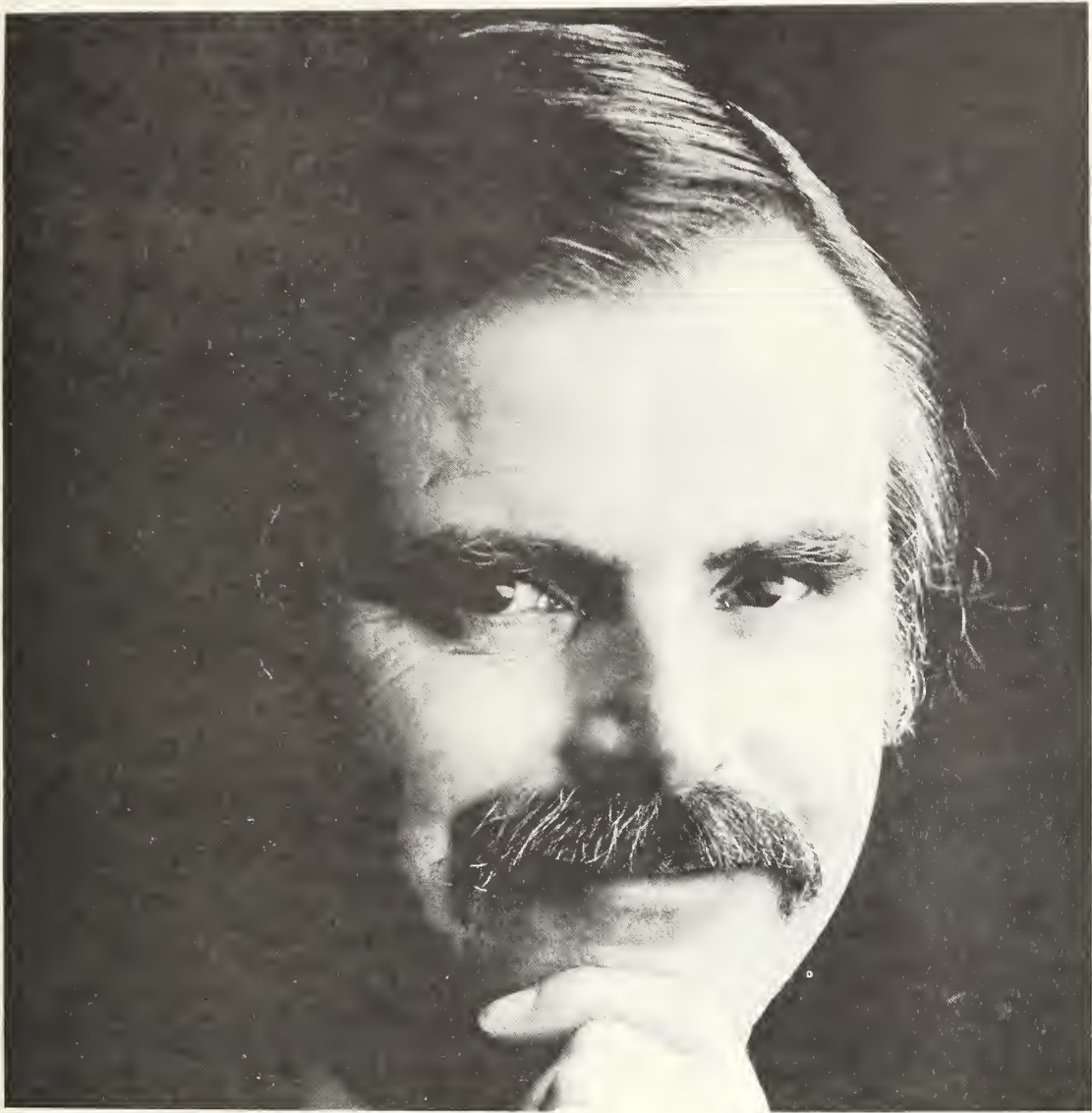
PROVIDE at least four examples of programs or efforts at present taking place within each of these strategies.

IDENTIFY the possible targets of each strategy.

DESCRIBE some of the weaknesses or potential problems inherent in each strategy.

HANDOUT #7

ADS ON ALCOHOL



There'll never be another Vice President like Richard.

Never.

The President made that promise to himself last Thursday afternoon, after Richard blew an important new-business presentation.

Richard isn't incompetent. The villain is his lunches, or rather the too-many drinks he often has at lunch. Come afternoon, he's just not as sharp as he was in the morning.

Richard is playing dice with his health. His old-fashioned business style is also sabotaging his career. Today, with competition

so rough and stakes so high, even the most generous company can't be patient for long with an employee whose effectiveness ends at noon.

If you're a friend, do Richard a favour by reminding him of the good sense of moderation.

You can bet the man eyeing his job won't help him.

Seagram

How to talk about drinking & driving



to your teenagers

We all know going out is fun, and no parent wants to take away those good times. But these days, with teenagers in and out of cars so much, it's crucial that they understand the dangers of drinking and driving, and that they can avert potential trouble by making the right decisions.

First, set your son or daughter straight on this often-misunderstood fact: beer, wine and spirits—in excess, all three are just as dangerous on the road.

A good way of avoiding trouble is to plan ahead. Suggest that your teenagers review their evening before going out. If they see drinking involved, far better to leave the car at home than to take chances later behind the wheel.

Far better also to say no to a drink, to refuse to drive, or to turn down a lift with an impaired friend than to go along with the crowd and maybe regret it.

You can support your teenagers and give them confidence by letting them know that if they ever need help you'll go for them, pay their cab or do whatever is necessary to get them home safely.

Most important, be a good example. Never drive if you've had even one drink too many. Better still, don't let it come to that. Know your limit and stay within it.

to your parents

If you're not of legal drinking age, don't touch a drop. But if you are, and you drive, then you're old enough to do your part in reaching an agreement with your parents on the subject.

Sure they worry. Because even if you don't drink, others in your group may. The friend driving you home one night may have had too much.

Show that you're equally concerned. Get serious. For instance, what have you read lately about the dangers of drinking and driving? Do you know how much beer, wine or spirits your body can safely handle before your judgment becomes impaired? Do you know the law in your province? And what happens if you break it?

Get the facts and discuss them calmly. Then take the initiative and propose a few family ground rules.

No driving if you've been drinking beyond your limit. (We'll send you a valuable free chart on responsible limits if you write us.) No riding with a friend who's been drinking. And convince your parents if a situation ever turns dicey, you won't hesitate to phone for help.

Finally, remind your parents you're concerned for their safety, too, and that the family rules on drinking and driving apply to them, as well.

Seagram

HANDOUT #8

LEARNING OBJECTIVES: UNIT A, MODULE 5

Upon completion of this module, participants should be able to:

EXPLAIN why it is important for prevention workers to have an understanding of contextual factors.

NAME at least six areas which help explain the functioning of organizational systems.

DESCRIBE how prevention workers might find out about how political decisions are made in any government department.

EXPLAIN how socioeconomic conditions within the local community, within the jurisdiction, and within the country as a whole might have an impact upon the prevention effort.

HANDOUT # 9

LEARNING OBJECTIVES: UNIT A, MODULE 6

Upon completion of this module, participants should be able to:

DESCRIBE at least two major ethical considerations in the field of prevention.

IDENTIFY at least two dilemmas that they may face in their work.

DEFINE what is meant by the term "counter-prevention".

STATE what attitudes toward substances, toward people, and toward work are helpful in this field.

ARTICULATE their own mandate in the field of prevention.

HANDOUT #10

LEARNING OBJECTIVES: UNIT B, MODULE 1

Upon completion of this module, participants should be able to:

EXPLAIN what is meant by "change".

DESCRIBE the five phases of change presented in the Lippitt model of change.

IDENTIFY at least five roles that a change agent might assume.

DESCRIBE at least two dilemmas that change agents might face and how these might be resolved.

HANDOUT #11

USING THE FIVE-PHASE MODEL

I DEVELOPING A NEED FOR CHANGE

- identifying activities for adolescents that at present exist in that community.
- speaking with adolescents in schools, shopping centres, libraries to obtain their ideas about the need for new programs.
- consulting with parents regarding their concerns and suggestions.
- interviewing teachers, principals, store owners, police, librarians, coaches, to discuss the needs of adolescents in that community.

- investigating the programs available in other communities.

II ESTABLISHING A CHANGE RELATIONSHIP

- calling a meeting to talk about the need for a new program.
- distributing flyers to adolescents in school to inform them all about the development of a new community program.
- setting up a task force of adolescents to help in the planning.
- establishing an advisory committee of parents, teachers, and community workers to help in the planning process.
- establishing a working agreement regarding the roles of the task force, advisory committee, and prevention worker.

III WORKING TOWARD CHANGE

- considering the range of options and selecting with the help of committees the most appropriate one (say a Saturday night coffee house).
- developing plans for what the selected program might entail.
- considering possible sites; visiting them and selecting one.
- identifying the essential components of the program: refreshments, maintenance, publicity.
- assigning responsibilities to particular individuals.
- determining budgetary requirements.

IV GENERALIZING; STABILIZING THE CHANGE

- establishing regular meetings of the task force to review how the program is going.
- establishing regular meetings of the advisory committee.
- holding meetings to inform parents about the program and responding to their concerns.
- working on problems that may arise; setting policies for the future (e.g. how to enforce a no-drug rule).
- setting up accounting, maintenance, and publicity procedures.

V TERMINATING THE RELATIONSHIP

- ensuring that policies for dealing with particular problems are established and clearly understood.
- encouraging task force to continue meeting to monitor and improve the program.
- encouraging advisory group to remain involved (if task force members feel this is necessary).
- ensuring that the program is financially viable before leaving (that it is self-supporting or that grants are ensured for a certain period of time).
- developing a mechanism for involving new students in the task force in order to ensure its viability.

HANDOUT #12

LEARNING OBJECTIVES: UNIT B, MODULE 2

Upon completion of this module, participants should be able to:

- DESCRIBE at least three possible roles a volunteer might assume in a prevention effort.
- IDENTIFY the major components of a job description.
- PROVIDE several examples of recruitment methods.
- DESCRIBE the purpose of the placement interview.
- IDENTIFY the major areas of content that should be included in an orientation session.

HANDOUT #13

LEARNING OBJECTIVES: UNIT B, MODULE 3

Upon completion of this module, participants should be able to:

- IDENTIFY at least five different types of media which may be employed for a prevention effort.
- DESCRIBE the major publicity principles to which they should adhere in order to develop a good working relationship with the media.
- EXPLAIN how a prevention worker might prepare for a radio or television interview.
- WRITE a press release.
- BEGIN to develop a media campaign.

HANDOUT #14

SAMPLE PRESS RELEASE

For release after March 12, 1986.

The Alcohol and Drug Commission of Bayview County is sponsoring a drug education fair. The fair is a multi-media exhibit containing pamphlets, posters, and slides about drugs and their effects. A staff member will be on hand to answer any questions from members of the public. The fair will be held in Foyer B of the Bayview Shopping Mall. It opens on Monday, March 17 and will continue until Friday, March 22. The drug education fair is one of a series of events that are being organized to make the residents of Bayview County more aware of drug use and related problems.

HANDOUT #15

LEARNING OBJECTIVES: UNIT B, MODULE 4

Upon completion of this module, participants should be able to:

- DESCRIBE the major stages involved in writing a report.
- PREPARE an effective written presentation.
- IDENTIFY the major stages involved in making an oral presentation.
- MAKE an effective oral presentation.

HANDOUT #16

LEARNING OBJECTIVES: UNIT B, MODULE 5

Upon completion of this module, participants should be able to:

- EXPLAIN what is meant by the term “networking”.
- EXPLAIN why networking is important to any prevention effort.
- IDENTIFY the individuals who comprise their own personal and professional networks.
- NAME at least three ways in which to identify appropriate contacts for a network.
- DESCRIBE at least two ways in which networks can be maintained.

HANDOUT #17

LEARNING OBJECTIVES: UNIT B, MODULE 6

Upon completion of this module, participants should be able to:

- IDENTIFY the major factors which must be taken into consideration when planning a meeting.
- DESCRIBE the major steps involved in the planning process.
- BEGIN planning a meeting.
- EXPLAIN the importance of a well-planned agenda for a committee meeting.
- IDENTIFY at least five major “rules of order” for committee meetings.

HANDOUT #18

LEARNING OBJECTIVES: UNIT B, MODULE 7

Upon completion of this module, participants should be able to:

- EXPLAIN what is meant by “lobbying”.
- DESCRIBE the three major lobbying strategies.
- IDENTIFY the difference between direct and indirect methods of lobbying.

HANDOUT #19

RULES FOR LOBBYING

PLAYERS

There are three prevention workers and two (or three) participants playing the other roles. These roles are:

- alcohol industry representatives: the owner of a local chain of restaurants and the president of the largest distillery in the country.
- members of the provincial legislative assembly: a backbencher and the Minister of Health.
- citizen group representatives: the president of a parents’ association and the president of the local chapter of MADD (Mothers Against Drunk Drivers).

- community influentials: the president of the local Chamber of Commerce and a physician who is the president of the local medical association.
- social service agency representatives: a social worker specializing in the counselling of alcoholics and a youth worker from the local youth services bureau.
- media representatives.
- observers.

COLOUR CODING

Participants' badges are colour-coded according to the roles they are playing. Outlined below are the colours that have been assigned to the roles:

- prevention workers : green
- alcohol industry representatives : red
- provincial members of parliament : yellow
- citizen group representatives : blue
- community influentials : orange
- social service agency representatives : purple
- media representatives : brown
- observers : pink

THE ISSUE

Because of their concern about the increased usage of alcohol, prevention workers are seeking to curb the prevalence of "happy hours".

STRATEGIC RESOURCES

Most groups of players have a certain amount of strategic resources allocated to them. These resources are power, knowledge, and political authority represented by red chips, blue chips, and yellow chips respectively. These resources are distributed in the following way:

- prevention workers: 1 red chip (power); 5 blue chips (knowledge)
- alcohol industry representatives: 10 red chips (power); 4 blue chips (knowledge)
- provincial members of parliament: 3 yellow chips (political authority)
- citizen group representatives: 5 red chips (power); 4 blue chips (knowledge)
- community influentials: 3 red chips (power); 2 blue chips (knowledge)
- social service agency representatives: 1 red chip (power); 10 blue chips (knowledge)
- media representatives: none
- observers: none

THE GOAL

The goal of this lobbying session is for prevention workers to gain enough political authority (in the form of three political authority chips) so that politicians will be convinced of the importance of introducing restrictions on the availability of alcohol. Prevention workers can obtain these three political authority chips in one or both of two ways. They can obtain a political authority chip directly from politicians by convincing them of the need for legislative change. Politicians can issue only one political authority point per meeting.

Prevention workers can also gain political authority points indirectly. Every time prevention workers can put together five knowledge chips and three power chips, they are entitled to obtain a political authority chip. They must

acquire these chips by convincing others to support their objective of curbing the prevalence of “happy hours”. The relevant others in the community can provide any combination of chips that they desire.

TEAM RULES

- Prevention workers may work together or on their own but they should be in constant contact with each other.
- An individual who is convinced by prevention workers of the need for change cannot give away more than half of the knowledge chips or more than half of the power chips on his or her own.
- Groups which have “thrown” all their resources behind prevention workers are considered to be part of the coalition and should participate with prevention workers in planning strategy for further action.
- Those opposed to the prevention effort may form their own lobbies to counter the prevention effort or may try to meet with politicians to persuade them not to support restrictions on “happy hours”.

HANDOUT #20

LEARNING OBJECTIVES: UNIT B, MODULE 8

Upon completion of this module, participants should be able to:

EXPLAIN what is meant by community mobilization.

IDENTIFY the difference between a geographic and a functional community.

DESCRIBE at least three ways in which prevention workers can learn about and gain the trust of a community.

STATE how prevention workers might identify key actors in a community.

DESCRIBE how the major problems in a community might be identified.

HANDOUT #21

LEARNING OBJECTIVES: UNIT C, MODULE 1

Upon completion of this module, participants should be able to:

IDENTIFY five methods of assessing needs.

NAME at least three factors that might influence the selection of a prevention strategy.

EXPLAIN how to go about setting goals for a prevention effort.

DESCRIBE how a plan of action for a prevention program might be developed.

HANDOUT #22

CHECKLIST FOR OBJECTIVES⁶

When the objectives for a prevention effort have been set, they can be verified against the key points identified in this checklist.

- Does the objective as stated help to solve the problem that has been identified?
- Is the objective expressed in a clear, meaningful way?
- Does the objective describe a measurable result?
- Is the objective realistic and practical, yet challenging?

⁶ Getting Active on Overdrinking: An Action Guide for Groups. Health and Welfare Canada, 1983.

- Is the target population specified?
- Is the length of time it will take to accomplish the objective specified?
- Is the geographical area specified?

HANDOUT #23

LEARNING OBJECTIVES: UNIT C, MODULE 2

Upon completion of this module, participants should be able to:

DEFINE what is meant by a working agreement.

NAME at least four kinds of resources that may be required for a prevention effort.

STATE where these resources may be obtained.

DESCRIBE at least four actions that might be taken to stabilize a prevention effort.

HANDOUT #24

LEARNING OBJECTIVES: UNIT C, MODULE 3

Upon completion of this module, participants should be able to:

DESCRIBE at least five methods of recruiting personnel.

IDENTIFY the purpose of orientation and describe the areas that might be covered.

DESCRIBE the three major components of supervision.

EXPLAIN and describe how the process of job appraisal might be undertaken.

HANDOUT #25

LEARNING OBJECTIVES: UNIT C, MODULE 4

Upon completion of this module, participants should be able to:

IDENTIFY the three aspects of a program upon which evaluation may focus.

EXPLAIN what is meant by a case design, a time series design, and a comparison group design.

DESIGN an evaluation using one of the above methods.

DESCRIBE at least three types of evaluation instruments.

Learning Activities

LEARNING ACTIVITIES

LEARNING ACTIVITY #1

ALCOHOL PERSPECTIVES

1 How was alcohol viewed during colonial times? For what purposes was it used?

2 What did the colonial perspective consider to be the cause of alcohol problems? What were the proposed solutions?

3 What were some of the key forces which ushered in the temperance movement?

4 How did the supporters of temperance view alcohol? What solutions did those supporters propose in order to prevent alcohol-related problems?

5 How does the medical model define alcohol problems? What is the corresponding solution?

6 What solutions did the socioculturalists propose with respect to reducing alcohol-related problems?

7 What is the major argument put forward by the distribution of consumption perspective?

8 What solutions are proposed to reduce the rates of alcohol-related damage?

ALCOHOL POLICY

	COLONIAL	TEMPERANCE	MEDICAL	SOCIO CULTURAL	DISTRIBUTION OF CONSUMPTION
CAUSES OF ALCOHOL PROBLEMS					
SOLUTIONS					
POLICY IMPLICATIONS					
PRESENT-DAY EXAMPLES					

ANSWERS TO "ALCOHOL POLICY"

	COLONIAL	TEMPERANCE	MEDICAL	SOCIO CULTURAL	DISTRIBUTION OF CONSUMPTION
CAUSES OF ALCOHOL PROBLEMS	<ul style="list-style-type: none"> - personal indiscretion - individual weakness 	<ul style="list-style-type: none"> - easy availability - social upheaval 	<ul style="list-style-type: none"> - biological or psychological disposition rendering certain individuals vulnerable to alcohol 	<ul style="list-style-type: none"> - lack of consensus on drinking behaviour 	<ul style="list-style-type: none"> - levels of consumption within a population; levels of consumption are closely linked with availability
SOLUTIONS	<ul style="list-style-type: none"> - public scolding in church sermons - spending time in stocks 	<ul style="list-style-type: none"> - moral suasion to reduce consumption - gradually changed to prohibition of the manufacture, importation, sale, and use of alcohol 	<ul style="list-style-type: none"> - treatment by trained professionals - support through Alcoholics Anonymous 	<ul style="list-style-type: none"> - development of consistent norms and guidelines for responsible drinking and unacceptable drinking 	<ul style="list-style-type: none"> - restrictions on availability in order to reduce overall consumption
POLICY IMPLICATIONS	<ul style="list-style-type: none"> - informal social control by means of public humiliation to deter others from displaying similar weaknesses 	<ul style="list-style-type: none"> - legal measures such as licensing of saloons; local option to vote certain areas "dry" 	<ul style="list-style-type: none"> - development of facilities for the treatment of alcoholics - programs of early identification 	<ul style="list-style-type: none"> - education programs in schools - programs to encourage public discussion on drinking 	<ul style="list-style-type: none"> - control measures such as pricing and taxation, limitations on numbers of outlets, hours of sale, importation controls
PRESENT-DAY EXAMPLES	<ul style="list-style-type: none"> - laws on public drunkenness 	<ul style="list-style-type: none"> - Narcotic Control Act 	<ul style="list-style-type: none"> - detoxification centres - Employee Assistance Programs 	<ul style="list-style-type: none"> - "Dialogue on Drinking" 	<ul style="list-style-type: none"> - laws on minimum age of alcohol consumption

LEARNING ACTIVITY #3

DRUG-RELATED PROBLEMS

Read the situations outlined below. Each describes a different drug-related problem. For each situation, indicate on the attached chart what type of problem is described by this situation. In the second column, try to identify at least three possible causes of this situation. There is no "right" answer with respect to causes.

Situation #1

Two 16-year-old friends decided to organize a "pill party" one weekend. Those invited were instructed to go through their medicine cabinets at home and to bring a few different pills to the party. It didn't matter what kind of pills they were. At the party itself, all the pills were poured together into a big pot. Each guest was required to choose three and to take them "in one shot". Some "downed" them with alcohol. Two of the guests passed out and one appeared to have convulsions.

Situation #2

A group of the "boys" from the office went for a drink on Friday afternoon after work. They told stories and drank beer for several hours. When they finally left the bar, three of them were visibly intoxicated. They "roughed up" the passing pedestrians, one of whom became very angry. A street fight broke out and the police had to be called to intervene.

Situation #3

Government officials concerned about high health costs undertook an investigation of where health funds have been deployed over the past decade. In examining the data collected, they found that there had been a significant increase in the rates of death from cirrhosis of the liver. They found that the change from 1248 deaths in 1965 to 2508 deaths in 1975 represented an increase of 101% over that decade (Alcohol Problems in Canada, 1976, p. 2.) They knew that liver cirrhosis is attributable largely to heavy alcohol use.

Situation #4

The same group of officials found that a significant amount of health dollars had been directed toward treating the symptoms of alcoholic brain disorders including hallucinations, disorientation, and memory failure. In fact, the investigators discovered that in 1972 alone, alcoholic psychosis and alcoholism accounted for 9252 (17%) of the first admissions and 8783 (17%) of the readmissions to psychiatric wards and institutions in Canada (Alcohol Problems in Canada, 1976, p. 2.)

Situation #5

The Blakes invited a few friends over for a dinner party. Robert Blake made sure that there was plenty of liquor on hand to serve the guests. He acted as the "perfect host" all evening by refilling everyone's glass as soon as the drink was finished. One of the guests was pretty tipsy when he left but the Blakes thought that he was putting on a bit of an act. They found out the next morning that on his way home, he drove into an old man who was crossing the street. The man suffered a concussion and died.

Situation #6

A group of teenage boys enjoy smoking marijuana together several times a week. When they found that this activity was getting to be expensive, they discussed how they could get some money to support their "habit". For the next few Saturday nights, they broke into a few houses in the neighbourhood and stole cash, jewellery, and other small valuable items which could be pawned.

Situation #7

Suzanne, a 22-year-old woman, decided that she wanted to try something new. She had heard that you could have a really fabulous "trip" on acid. She contacted an acquaintance who had once offered her some of the drug. But the "trip" turned out to be nothing like she had expected. She had taken it alone and was overwhelmed by the sounds and visions which seemed to bombard her. She ran down the stairs of her apartment, looking frantically for help. Suddenly, she tripped and fell down a full flight of stairs. She broke her arm and her body was badly bruised.

Situation #8

In a Canadian study conducted in 1969, 115 children who had one or both parents as alcoholics were interviewed. The children reported feeling rejected by their parents. They expressed concerns about parental fighting, quarrelling, and lack of interest of the non-alcoholic and/or alcoholic parent. Some worried about their own marriages and felt that their own family lives were inadequate (Cork, 1969).

LEARNING ACTIVITY #3

	Type of Problem	Possible Causes
Situation #1 Pill Party	_____	_____
Situation #2 Street brawl	_____	_____
Situation #3 Death rates (cirrhosis of liver)	_____	_____
Situation #4 Alcoholic brain disorders	_____	_____
Situation #5 Impaired driving	_____	_____
Situation #6 Petty thefts	_____	_____
Situation #7 Falls down stairs	_____	_____
Situation #8 Alcoholic parents	_____	_____

LEARNING ACTIVITY #3a

SAMPLE COMPLETED WORKSHEET

Situation	Type of Problem	Possible Causes
#1 Pill Party	Acute health problem	<ol style="list-style-type: none"> 1. peer pressure 2. toxic combinations 3. lack of knowledge of drugs' effects
#2 Street brawl	Problem of demeanour	<ol style="list-style-type: none"> 1. individuals drank too much 2. bartender served even though they were drunk 3. social norms encouraging the "TGIF ritual"
#3 Death rates (cirrhosis of liver)	Chronic health problem; casualty	<ol style="list-style-type: none"> 1. excessive consumption of alcohol 2. lack of knowledge re. effects of excessive drinking 3. increase in availability of alcohol encouraged increase in consumption
#4 Alcoholic brain disorders	Acute and chronic health problems; mental problems	<ol style="list-style-type: none"> 1. excessive consumption of alcohol 2. alcohol was toxic for those individuals 3. alcohol could have been used inappropriately (e.g. in combination with other drugs)
#5 Impaired driving	Casualty	<ol style="list-style-type: none"> 1. excessive consumption of alcohol 2. social pressure to drink 3. pairing alcohol with another activity resulting in a "hazardous combination"
#6 Petty thefts	Problem of demeanour; casualty	<ol style="list-style-type: none"> 1. lack of alternative activity in community 2. peer pressure 3. poor decision-making with respect to drug use and theft
#7 Falls down stairs	Casualty	<ol style="list-style-type: none"> 1. inexperience with this drug 2. too much may have been taken 3. drug taken alone
#8 Alcoholic parents	Mental problem	<ol style="list-style-type: none"> 1. parental modelling 2. low self-esteem 3. poor communication in the home

LEARNING ACTIVITY #4

CORRELATES OF DRUG USE

Make a list of at least five factors (in addition to the two examples provided in each column) that are positively correlated with drug use and at least five factors that are negatively correlated with drug use. These factors may relate to the individual, to the family, to the peer group, to the school, or to the community.

Positive Correlates

1. + excessive personal stress
2. + parental use of drugs or alcohol
- 3.
- 4.
- 5.
- 6.
- 7.

Negative Correlates

1. - religious beliefs
2. - presence of extended family
- 3.
- 4.
- 5.
- 6.
- 7.

LEARNING ACTIVITY #5

MEMORANDUM TO HONORARY MINISTERS⁷

TO:
FROM: THE GREAT TAPAGI
DATE:
RE: PREVENTION OF DRUG-RELATED PROBLEMS

Congratulations. You have been appointed Honorary Minister of Prevention of Drug-Related Problems for your province or territory. You have been selected because of your commitment to prevention, your expertise and experience in the area. The position is honorary at this time, but may become a lifetime one, depending upon your initial plans for programming ideas. You are asked to prepare a brief proposal designed to prevent drug-related problems in your province or territory. The proposal outlining your key ideas should be guided by the following considerations:

1. **Responsibility:** You are responsible for preparation of a program plan for the prevention of drug-related problems for the whole jurisdiction. You may choose to concentrate your work in certain areas, as long as you are able to justify your priorities.
2. **Authority:** You have absolute authority to make all program-related decisions. There are no limitations on human or financial resources.
3. **Expected Outcomes:** The outcome expected is a broad, long-range strategies plan for the prevention of drug-related problems in your jurisdiction. You are free to use any process. You may choose to use a program planning model and consider the purpose, goals or problems. You need document only the following three areas in point form summary on flipchart paper.

a. Major Strategies

These strategies would be major preventive activities you would recommend. There are no limitations on resources. Innovation and creativity will be highly valued in assessing these strategies.

b. Target Areas

The target areas would be the key areas in which you plan to make the changes.

c. Expected Results

These would be the key changes that would be expected as a result of the above strategies being implemented in the specified target areas.

4. Concluding Remarks.

It is expected that, with the help of your able deputies, you will prepare an outline in point form on flipchart paper of a prevention program for drug-related problems for your jurisdiction. Creative and innovative ideas are highly encouraged.

5. **Follow-up Plans.** You will be making a presentation of your plan (approximately 10 minutes) to a panel who will provide constructive questioning and feedback.

The Great Honourable Tapagi

c.c. Deputy Honorary Minister of Prevention of Drug-Related Problems

⁷ Developed and used by the Alberta Alcohol and Drug Addiction Commission and the Alcoholism Foundation of Manitoba.

MEMORANDUM TO DEPUTY MINISTERS

TO:

FROM: The Great Tapagi

DATE:

RE: PREVENTION OF DRUG-RELATED PROBLEMS

Congratulations. You have been appointed a Deputy Honorary Minister of Prevention of Drug-Related Problems for your province/territory. You have been selected because of your specific expertise in prevention programming in the drug field. Your function is to assist the Honorary Minister of Prevention of Drug-Related Problems in the preparation of a proposal for prevention programming in your province/territory (see copy of letter enclosed).

Depending upon the quality of the proposal, the honorary position may become a lifetime one. I wish you the best in your endeavours.

The Great Honourable Tapagi

Encl.

c.c. Honorary Minister of Prevention of Drug-Related Problems

LEARNING ACTIVITY #6

REASONS FOR DRINKING

The purpose of this learning activity is to explore various reasons and myths for drinking. Throughout history people have given various reasons for drinking. These have ranged from curing colds to treating snakebite. Most of these excuses are made to justify one's drinking and have no medical foundation. Read the following poem. List the reasons given for drinking. Place an "x" beside any reason you believe to be a myth (a thing that cannot be proved scientifically). Discuss.

For old Billy Bledsoe of West Liverpool
Alcohol worked like a charm;
In the simmer of summer he drank to keep cool,
In winter he drank to keep warm.

A nip in the morning to open his eye;
A toddy at night for his snooze;
His cure for a cold was a dram of old rye,
And for fever he ordered some booze.

With a wedding or birth to commemorate,
Old wine warmed the cockles within;
And when he was sad or down in his fate
He drowned all his troubles in gin.

Reasons for Drinking (from poem)	Myth	Truth
1 _____		
2 _____		
3 _____		
4 _____		
5 _____		
6 _____		
7 _____		
8 _____		

LEARNING ACTIVITY #7

SKIT ON "BOOZE"⁸

In this skit, two teenage girls become progressively intoxicated as they sneak drinks from dad's bottle of vodka. Their fun continues until an older brother informs them that he and his friends drank the bottle of vodka and replaced it with water some time ago.

(lights up on Jill sitting centre
Sally is off getting glasses)

Jill: Are you sure nobody's going to come home?

Sally: (off) Yes, I told you my parents have gone away until Sunday.

Jill: What about your brother?

Sally: He's out with his girlfriend.

Jill: He might come home.

Sally: Not until at least 3 in the morning (entering). Anyway he's alright, so forget it.

Jill: He won't tell your dad?

Sally: (exiting) He hadn't better the nurd. I've got a few things on him, don't worry.

Jill: Oh ya... what?

Sally: (off) Well. Last time Mum and Dad were away he unhooked the speedometer to the car and drove it to Duluth.

Jill: You're kidding?

Sally: (entering with bottle of Vodka) No. Then he hooked it up again.

Jill: Wow! what a far out thing to do.

Sally: Ya and I know all about it.

They stare at bottle. (pause)

Jill: So this is it eh? (staring)

Sally: Ya. (staring)

Jill: It looks just like water.

Sally: (with an evil glint) Yeah I know.

Jill: What do you mean?

Sally: (marking the bottle with tape) We can drink as much as we want and then we fill it up again with water.

Jill: That will never work... will it?

Sally: Sure. My old man doesn't drink much anyway. This has been in the cupboard for years.

Jill: But what'll happen if he finds out?

Sally: He won't find out I told ya.
(she pours drinks)

Jill: Do you just drink it like this?

⁸From "Booze" a script by James R. Sallows. Copyright Alcoholism and Drug Addiction Research Foundation, Toronto, Canada 1983.

Sally: Sure why not?

Jill: I don't know. I thought maybe you should mix it with coke or something.

Sally: Coke? You don't know anything, do you?

Jill: (sniffing) It doesn't smell bad.

Sally: No. Taste it.

Jill: You taste it.

Sally: I already have.

Jill: Oh... What's it like?

Sally: Taste it, will ya.

Jill: (She takes a cautious sip) Not bad.

Sally: See.

Jill: It doesn't taste like anything.

Sally: Exactly. Colourless, odourless, tasteless, and when you drink it, it leaves you senseless.

Jill: Where'd you get that?

Sally: My dad.

(Sally drinks a hefty belt and
Jill watches expectantly)

Sally: Good.

Jill: (drinks) Ya not bad.

Sally: Here have some more. (she refills glasses) (they drink, pause) Feel anything yet?

Jill: I'm not sure. You?

Sally: (giggling) My nose tickles.

Jill: (giggling) Your nose tickles?

Sally: Ya. Have some more. (she pours)

Jill: This is good eh?

Sally: Ya. (they drink)

Jill: If my dad knew I was drinking Vodka. He'd kill me.

Sally: (a bit tipsy) Wodka... Roosian Wodka.
(Drunkenness should begin to appear)

Jill: You're nuts.

Sally: Hey let's phone that guy on the football team.

Jill: Who, you mean Kevin Barnes?

Sally: (dreamily) Ya... Kevin Barnes.

Jill: Kevin Barnes. He's 17.

Sally: So what, I don't care if he is 40.

Jill: Oh wow! (giggling) Kevin Barnes. He won't be home tonight...

Sally: How do you know? (she starts to exit)

(pick up pace)

Jill: Wait... wait... let's have another drink.

Sally: Ya... another drinkie pooh. (laughter)

Jill: This stuff is delicious. I'm feeling really... weird.

Sally: Does your nose tickle yet? (laughter)

(they start to sing a popular song)

Sally: I'll get the phone.

Jill: Ya, get the old phoneroonie. (laughs)

Sally: (off stage) Is this the one... on McKellar St.?

Jill: Noooope.

Sally: Marion St.?

Jill: Noooooope.

Sally: Algoma?

Jill: Yeeeessss.

Sally: (entering) 345-2479. Here I'll dial.

Jill: You dial? Don't give me that, it was your idea.

Sally: Okay, but first one more drink.

(drunkenness well established)

Jill: (applauding) Yeah!

(she pours, they drink, intermittent banter, singing, etc.)

Gimme that phone?

Sally: 345-2479.

Jill: 3..4..5... what?

Sally: 2..4..7..9.

Jill: It's ringing... here.

Sally: Good evening sir. Is Kevin at home... what?...oh ...oh ...sorry. (she hangs up) 345-2479- moron?

Jill: That's what I dialed. What was it?

Sally: The humane society.

(they laugh. We hear off Tom's voice) Reaction to Tom's voice.

Tom: Okay! I'll just be a minute.

Sally: Jesus. It's my stupid nurd brother.

Jill: Oh God! what'll we do... I'm going to hide.

Sally: Just sit there and act normal. (they laugh momentarily then hiding the bottle beside them they sit straight as pokers) – eyes front

Tom: (crossing to bedroom) Hi, what's up? (exits) (they do not move) (off) Have you seen my pack Sally... never mind I found it. (enters, stops, looks at them) What the hell are you two doing? (they are unable to keep it... in they break up laughing, ad libbing) What are you into?

Sally: (brazenly brandishing the bottle) If you tell boy I'll tell about the car and the skin books in the basement and the...

Tom: Hold on, I won't tell anybody. Where'd you get this?

Sally: It's dad's...

Tom: Dad's?

Sally: Yes.

Tom: The bottle that was in the cupboard?

Sally: Yes.

Tom: On the top shelf?

Sally: Yes... on the top shelf.

Tom: (slyly) Nice and smooth eh?

Both: Ya good etc.

Tom: It ought to be, it's only water. (Girls are paralytic with shock) (he sniffs) Yeah water. I killed that bottle a month ago. You see if you steal the old man's booze, just mark the level before you start and fill it back up afterwards. Good idea, eh? Well, see ya. (he exits)

(both are mortified)

Jill: (Wilting) I'm so embarrassed.

(curtain)

LEARNING ACTIVITY #8

EMPLOYING CONTROLS

John Doe, M.P.
Legislative Buildings
Capital Hill

Dear Constituent:

Thank you for having contacted me with respect to your concern about drugs in your community. I, too, am concerned about the prevalence of drug-related problems in my constituency. I agree with you that alcohol appears to be the major drug of abuse.

In preparation for our meeting, I would request that you make at least six recommendations with respect to curbing the availability of alcohol in your neighbourhood. Please make your recommendations as specific as possible so that I can pass them along to my staff for further consideration.

As I mentioned to you, I am not able to make any changes with respect to increasing the penalties for impaired driving contained in the Criminal Code. I therefore suggest that you limit your recommendations to measures which would result in restrictions upon the availability of alcohol.

Naturally, the measures you are proposing are likely to encounter resistance from various groups and organizations. Please try to provide me with an indication of the negative reaction such measures may generate.

I am looking forward to discussing these issues with you next week.

Sincerely,

John Doe, M.P.

Measures to Curb Alcohol Availability

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

Potential Sources of Resistance

1. _____
2. _____
3. _____

BARRIERS TO COMMUNICATION

BARRIERS	HOW TO OVERCOME
Attitude not accepting	
Not expressing feelings	
Forbidden topics	
Too busy to talk	
Giving advice	
Being angry	

LEARNING ACTIVITY #10

PUMPKIN'S PROBLEM

Discuss as a group the following questions:

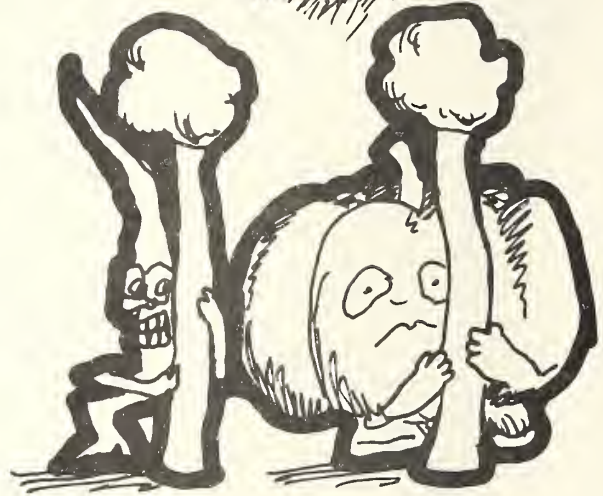
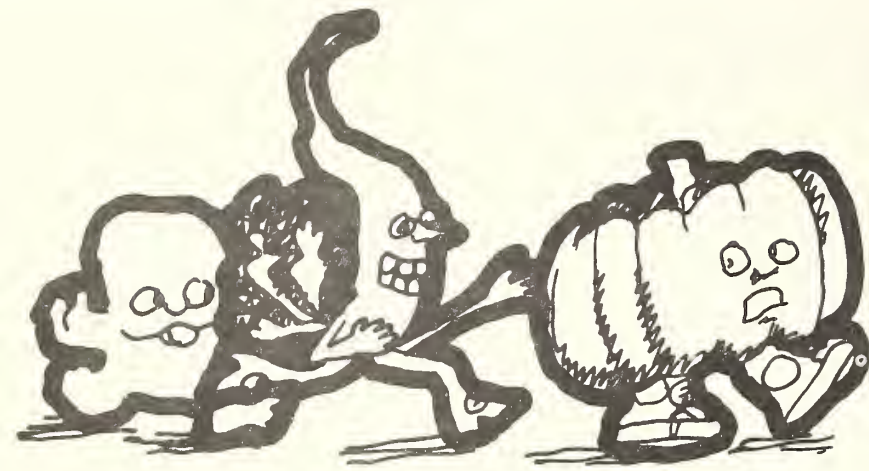
1. What is Pumpkin's "problem"?
2. What actions does he take in an attempt to deal with his "problem"?
3. How is the "problem" finally resolved?
4. What is the "moral" of this story?
5. How would this story apply to a real-life situation?
6. How does such a story help improve children's ability to make decisions and to feel good about themselves?

Pumpkin's problem

Pumpkin, Radish, Carrot and Potato are playing hide and seek. "I can see you," squeals Carrot with delight.

He runs over and touches Pumpkin before he can run away. "You're 'it'," laughs Potato.
"I don't like this game," thinks Pumpkin.



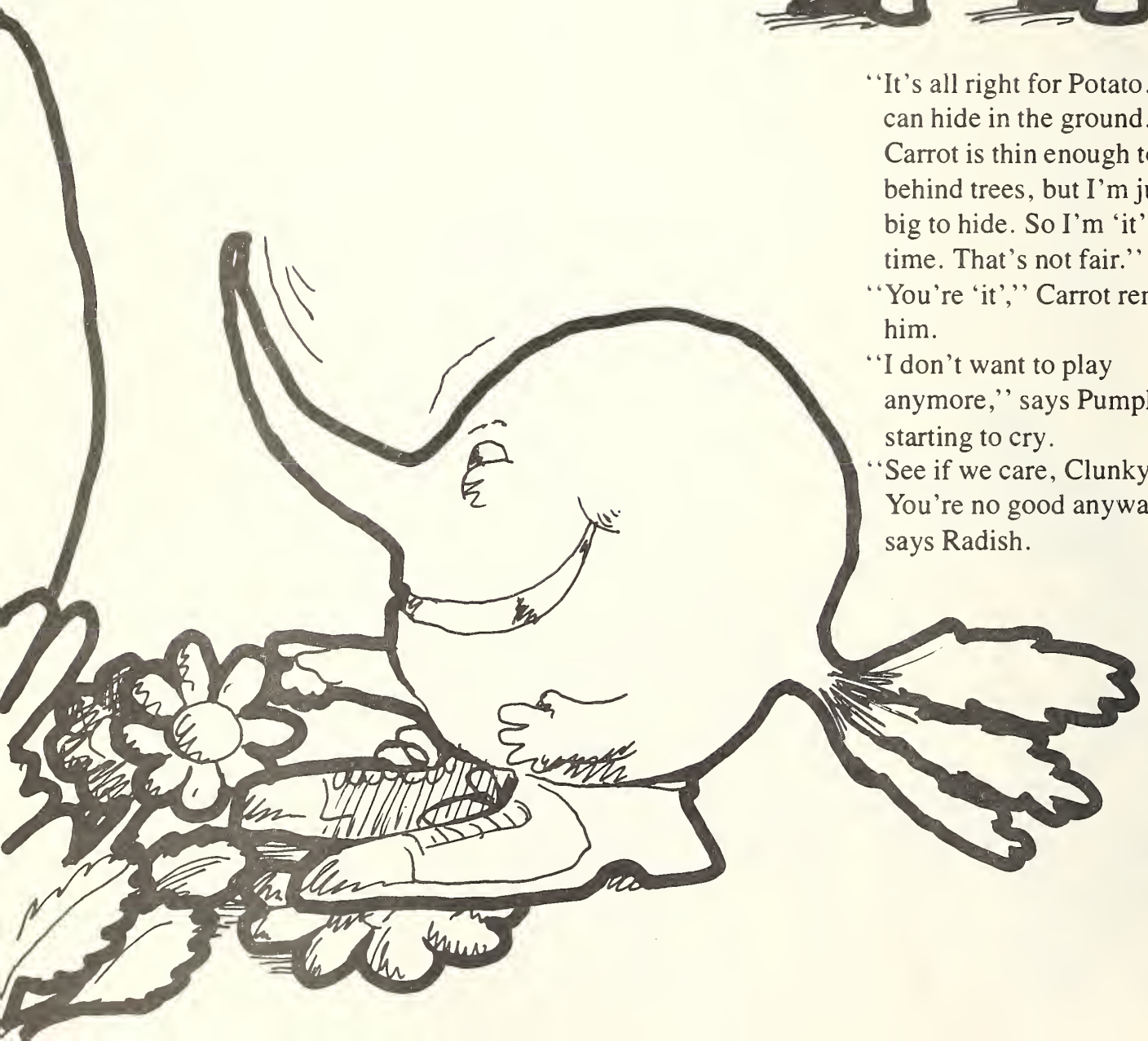


“It’s all right for Potato. He can hide in the ground. Carrot is thin enough to hide behind trees, but I’m just too big to hide. So I’m ‘it’ all the time. That’s not fair.”

“You’re ‘it,’” Carrot reminds him.

“I don’t want to play anymore,” says Pumpkin, starting to cry.

“See if we care, Clunky. You’re no good anyway,” says Radish.





Pumpkin goes away feeling very unhappy. "Pumpkin is a clunky," they all shout after him. "Clunky, Clunky!"

"I'm going to make myself very small. Then I'll be able to play hide and seek and they won't laugh at me anymore," he decides.



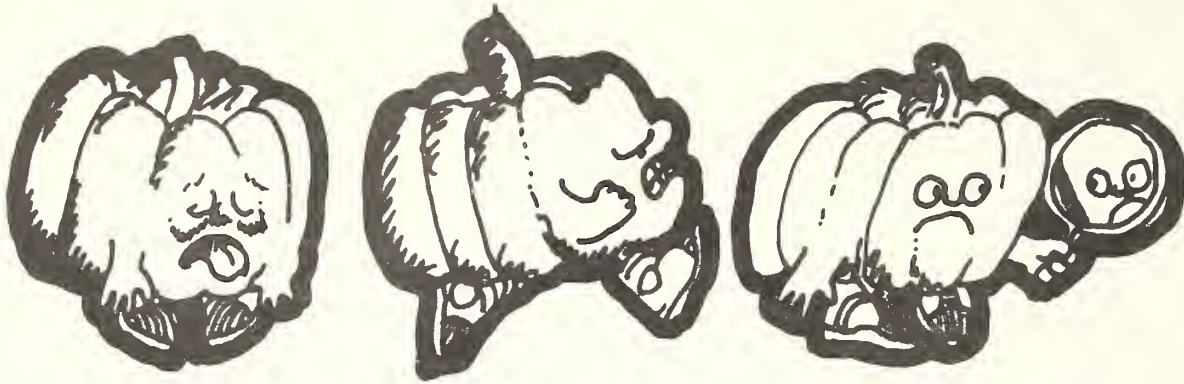
and hungrier,

First he goes on a diet.
He gets hungrier



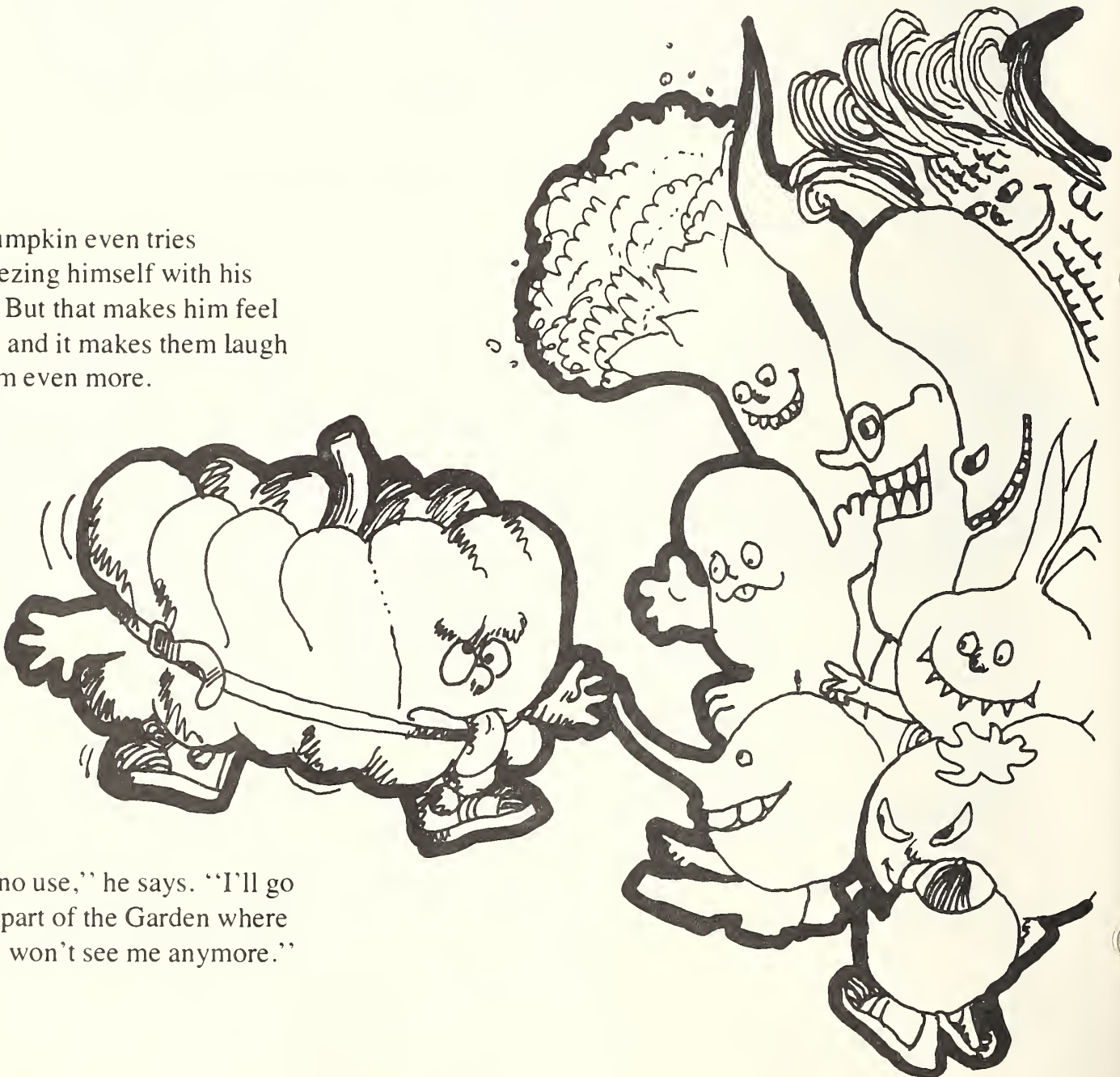
but no smaller.



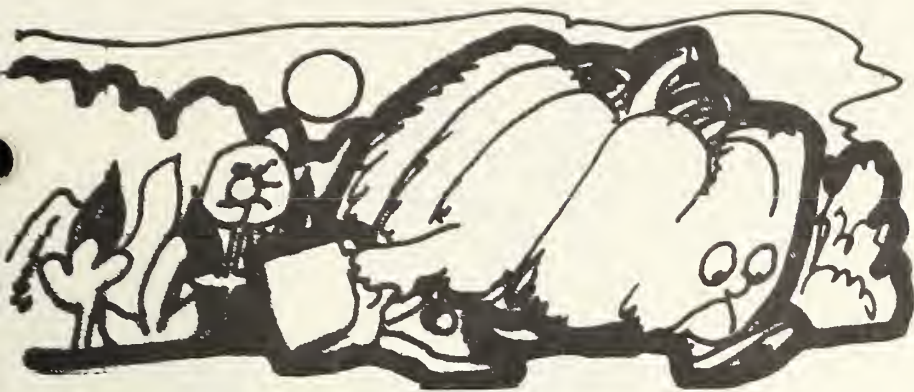


The next day, he says to himself, "Exercise, that's what I'll do instead." Pumpkin touches his toes a hundred times without bending his knees and runs all over the Garden. When he looks in the mirror, he sees that he hasn't changed a bit. "I feel good and healthy," says Pumpkin, "but I'm still big."

Pumpkin even tries squeezing himself with his belt. But that makes him feel sick, and it makes them laugh at him even more.



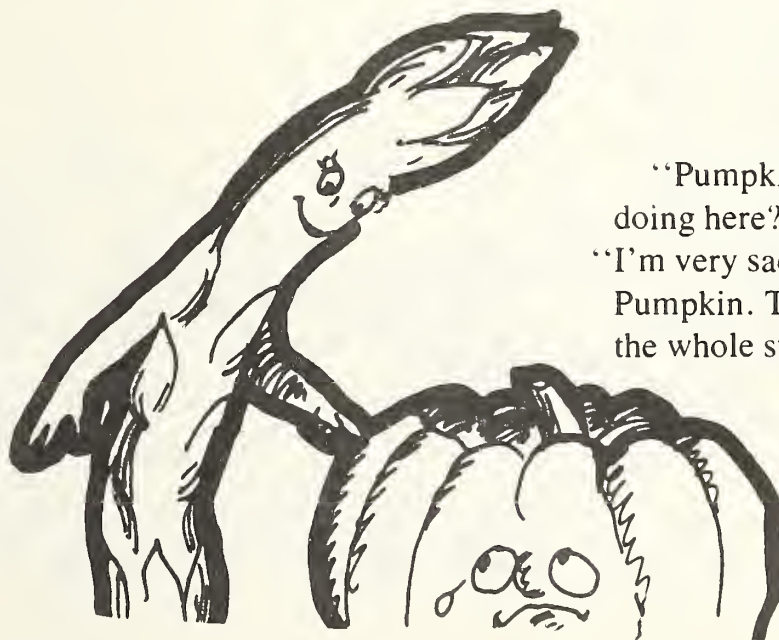
"It's no use," he says. "I'll go to a part of the Garden where they won't see me anymore."



He packs his bag and leaves.



It is lonely at the edge of the Garden. It makes Pumpkin feel even worse. "I can't help it if I'm big," he says over and over again.



"Pumpkin, what are you doing here?" It is Asparagus. "I'm very sad," says Pumpkin. Then he tells her the whole story.



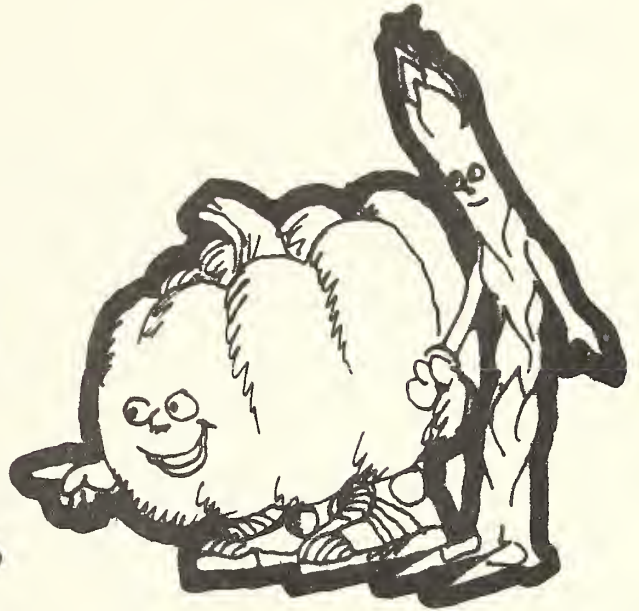
“That’s very strange,” says Asparagus. “They laugh at me because I’m tall and thin.”

“But you’re beautifully thin,” says Pumpkin, admiring her. “You’re marvelously big,” Asparagus replies. They both laugh.



“How silly we’ve been,” says Asparagus. “You’re big and I’m thin. We’re different, that’s all. Let’s not pay any attention if anyone teases us.”

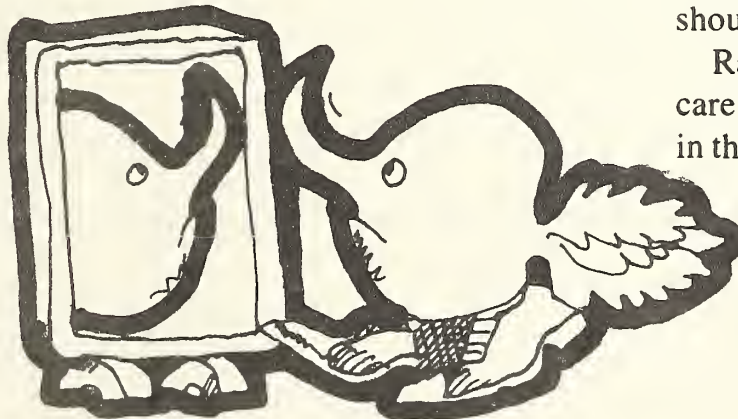
Pumpkin and Asparagus dance together. They look a pretty sight. "Come on," says Pumpkin. "Let's go back together." Off they go.



"Hey, here comes Clunky Pumpkin with Skinny Asparagus," teases Radish. "If I were you," says Pumpkin, "I'd worry about that dumb nose you have." "But, Pumpkin," says Asparagus. "That's like them telling you you're clunky."

"Yes, you're right," says Pumpkin. "Sorry, Radish. I shouldn't have said that."

Radish pretends he doesn't care, but later he runs to look in the mirror anyway.



ENVIRONMENTAL DESIGN

PROPOSED MODIFICATIONS		
WORKPLACE	COMMUNITY	EDUCATIONAL INSTITUTION
1.	1.	1.
2.	2.	2.
3.	3.	3.

LEARNING ACTIVITY #12

ORGANIZATIONAL CHARACTERISTICS

Consider the organization in which you are at present employed or have been employed in the last two years. Try to answer (in point form) the following questions with respect to that organization.

1. What is (are) the major purpose(s) of the organization? (e.g. to provide treatment to alcoholics; to educate the public with respect to alcohol; to conduct research on the effects of drug use).
2. What are some of the primary tasks that the organization must carry out in order to achieve this (these) purpose(s)? Try to name at least four (e.g. set up an intake system; develop a drug education curriculum).
3. How long has this organization existed?
4. Have there been major changes in the activities carried out by the organization since its inception? If yes, in what way?
5. What is the source of this organization's funds?
6. Try to draw the structure of this organization and locate yourself within this structure. Try to go at least two positions higher than yourself. In addition, indicate those who are considered to be your co-workers (i.e. they have the same title, job description, supervisor, or work in the same unit).
7. To whom does your supervisor or boss report?
8. Is there a board of directors? If yes, what are their major functions? If so, how are policies developed and by whom?
9. Who is primarily responsible for the development of policy in this organization?
10. What are the major external forces influencing this organization? (citizen groups, expert committees, government departments).

THE ALCOHOLISM QUESTIONNAIRE¹

	Disagree				Agree		
	1	2	3	4	5	6	7
1. A person who often drinks to the point of drunkenness is almost always an alcoholic.							
2. People who become alcoholics are usually lacking in will power.							
3. Most alcoholics have no desire to stop drinking.							
4. The average alcoholic is usually unemployed.							
5. A person can inherit a weakness for alcohol.							
6. The alcoholic is helpless to control the amount of alcohol he drinks.							
7. Alcoholics usually have severe emotional difficulties.							
8. Alcoholism is best described as a habit rather than an illness.							
9. The alcoholic drinks excessively mainly because he enjoys drinking.							
10. An alcoholic can get into as much trouble by drinking beer as by drinking liquor.							

¹ Marcus, Alan M. "The Alcoholism Questionnaire: Administration, Scoring and Interpretation," Toronto, Addiction Research Foundation.

THE ALCOHOLISM QUESTIONNAIRE¹

	Disagree						Agree
	1	2	3	4	5	6	7
11. A person who frequently stays intoxicated for several days at a time is unquestionably an alcoholic.							
12. The alcoholic is seldom helped by any sort of medical or psychological treatment.							
13. The alcoholic has only himself to blame for his problems.							
14. Alcoholics, on the average, have a poorer education than other people.							
15. Alcoholics seldom harm anybody but themselves.							
16. Hardly any alcoholics could drink less even if they wanted to.							
17. The most sensible way to deal with alcoholics is to compel them to go somewhere for treatment.							
18. The alcoholic is a morally weak person.							
19. An alcoholic's basic troubles were with him long before he had a problem with alcohol.							
20. Once a person becomes an alcoholic, he can never learn to drink moderately again.							

THE ALCOHOLISM QUESTIONNAIRE¹

	Disagree							Agree
	1	2	3	4	5	6	7	
21. The harm done by alcoholics is generally over-estimated.								
22. Very few alcoholics come from families in which both parents were abstainers.								
23. Even if an alcoholic has a sincere desire to stop drinking, he cannot possibly do so without help from others.								
24. Nobody who drinks is immune from alcoholism.								
25. Even if a heavy drinker is able to stop drinking for several weeks at a time, he may still be an alcoholic.								
26. Alcoholism is a sign of character weakness.								
27. Alcoholism never comes about very suddenly.								
28. Unhappy marriages and other unpleasant family situations often lead to alcoholism.								
29. Alcoholism is not a disease.								
30. Most alcoholics could not be rehabilitated even if more help were available to them.								

THE ALCOHOLISM QUESTIONNAIRE¹

	Disagree			Agree			
	1	2	3	4	5	6	7
31. Alcoholics are seldom found in important positions in business.							
32. Preferring to drink alone rather than with friends is a sign of alcoholism.							
33. Alcoholics are usually in good physical health.							
34. The alcoholic is basically a spineless person who has found an easy way out of his problems.							
35. Some people who drink heavily, but only on weekends, are alcoholics.							
36. An alcoholic usually has something in his past which is driving him to drink.							
37. Most alcoholics are completely unconcerned about their problem.							
38. With proper treatment, some alcoholics can learn to take the occasional social drink without getting into trouble.							
39. Most alcoholics are either drunk or drinking every day.							
40. A person usually has very little warning before he becomes an alcoholic.							

LEARNING ACTIVITY #13a

SCORING THE ALCOHOLISM QUESTIONNAIRE

Factor	Defining Items	Interpretation	Experts' Position
1. Emotional difficulties	7,19,28,36	A high score indicates the belief that emotional difficulties or psychological problems are an important contributing factor in the development of alcoholism High	
2. Loss of control	6,16,27,32	A high score indicates the belief that the alcoholic is unable to control his drinking behaviour.	High
3. Prognosis of recovery	9,12,30,37	A high score indicates the belief that most alcoholics do not, and cannot be helped to, recover from alcoholism.	Low
4. The alcoholic as a steady drinker	1,11,25,35	A high score indicates the belief that periodic excessive drinkers can be alcoholics. A low score indicates the belief that a person must be a chronic excessive drinker in order to be classified as an alcoholic.	High
5. Alcoholism and character defect	2,18,26,34	A high score indicates the belief that the alcoholic is a weak-willed person.	Low
6. Social status of the alcoholic	4,14,22,31	A high score indicates the belief that alcoholics come from the lower socio-economic strata of society.	Low
7. Alcoholism as an illness	8,13,29,38	A high score indicates the belief that alcoholism is not an illness.	Low
8. Harmless voluntary indulgence	3,15,21,33	A high score indicates the belief that the alcoholic is a harmless heavy drinker whose drinking is motivated only by his fondness for alcohol.	Low
9. Addiction liability	10,20,24,40	A high score indicates the belief that alcohol is a highly addicting substance.	High
10. Additional items	5,17,23,39		

LEARNING ACTIVITY #14

MANDATE

Answer these questions to the best of your ability. If you are unsure about a particular answer, you should indicate in point form how you would go about finding out the answer.

1. Your mandate in the field of prevention allows you to employ which of the following prevention strategies?

Influence
Control
Competence Development
Environmental Design

2. Your mandate in the field of prevention allows you to work with which of the following target groups?

parents	general practitioners
workers	nurses
teachers	pharmacists
elementary school students	others
high school students	(specify)
university students	

3. Your mandate in the field of prevention allows you to work in which of the following settings?

schools	community
workplaces	other organizations (specify)

4. Do you have a written mandate? If so, how is it stated?

5. What is the mandate of your organization in the field of prevention? (If different from your personal mandate in prevention.)

6. If it were necessary to expand or modify your mandate in the field of prevention, what actions would have to be taken to effect such a change (e.g. obtain permission from a supervisor and/or make a presentation to the board of directors and/or lobby for a legislative change)?

LEARNING ACTIVITY #15

CHANGE AGENT ROLES

Below each of the change agent roles, provide an example of the activities that this role might entail.

1. GUIDE
2. ENABLER
3. EXPERT
4. CATALYST (EXPEDITER)
5. IMPLEMENTER
6. RESEARCHER
7. BROKER
8. ADVOCATE

LEARNING ACTIVITY # 16

VOLUNTEER JOB DESCRIPTION

TITLE (if applicable):

GENERAL AREA OF RESPONSIBILITY:

SPECIFIC TASKS:

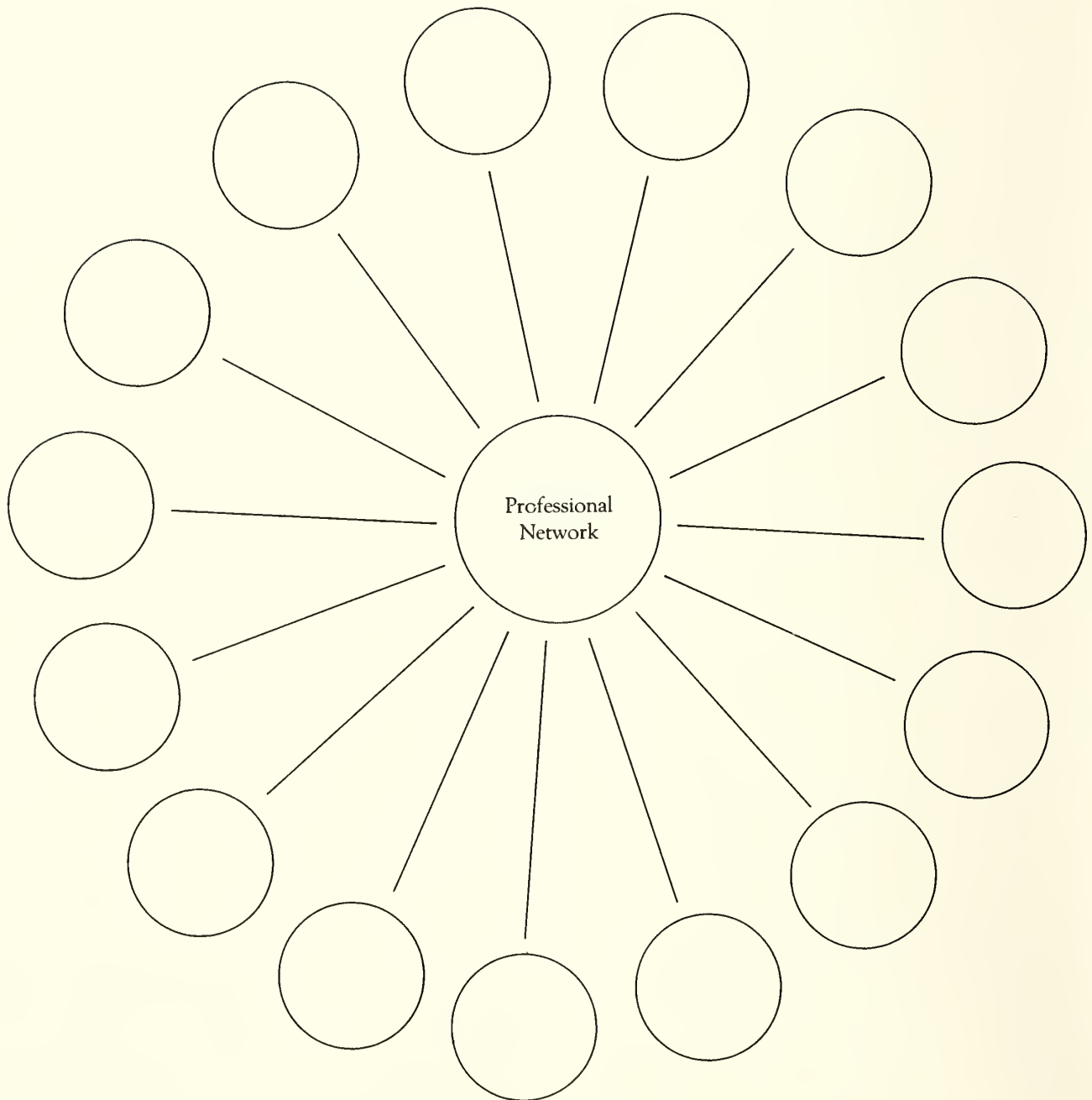
QUALIFICATIONS (if applicable):

SUPERVISOR:

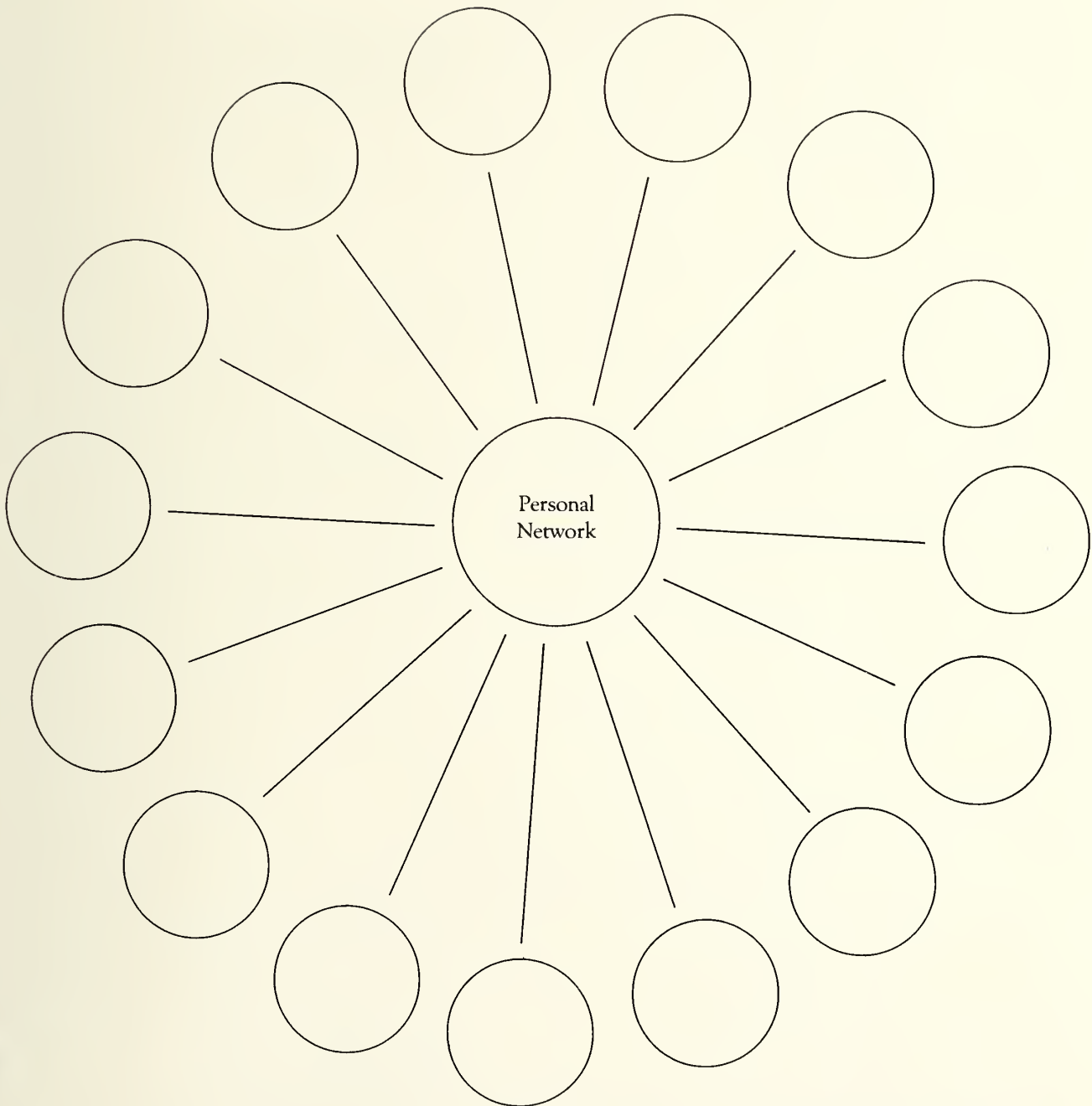
Try to identify at least five places where volunteers to fill this position might be recruited.

1. _____
2. _____
3. _____
4. _____
5. _____

NETWORKS



NETWORKS



LEARNING ACTIVITY #18

PLANNING MEETINGS

1. Objective(s) of the meeting:
2. Content of the meeting:
3. How content will be presented to or considered by audience:
4. Guest speakers/group leaders required: Who will contact them?
5. Possible meeting locations: Who will investigate?
6. Proposed seating arrangements:
7. Publicity plans: Who is responsible?
8. Possible follow-up actions: Who will carry these out?
9. Refreshments:

LEARNING ACTIVITY #19

COMMUNITY ASSESSMENT

Answer these questions about the geographic community in which you live (town, municipal area, suburb) to the best of your ability. If you are unable to answer a particular question, indicate where you might go or whom you might contact to obtain the information.

1. What is the approximate population of this community? 1000 ; 1000-5000 ; 5000-10 000 ; 10 000-15 000 ; 15 000 .
2. Has your community grown rapidly in the past five years? Remained the same? Decreased in size? .
3. What sources might be tapped to get more information about this community (e.g. libraries, public records, neighbourhood associations)?
4. What are the geographic boundaries of your community? (Try to name north, south, east, and west boundaries.)
5. What is the major economic basis of your community? (If this is primarily a suburban area, name several of the major employers to which residents may commute.)
6. Are the majority of dwellings owner or rental occupied?
7. List some of the establishments which employ local people to perform service for the community (e.g. stores, schools, municipal recreation departments).
8. What special advantages does your community present-shopping, schools, transportation, parks, low property taxes?
9. What key problems require attention in your community? e.g. traffic congestion, industrial pollution, inadequate park and play space, poorly planned real estate developments, inadequate school facilities.
10. How can members of the community participate in making decisions in any of the above areas? Is there an organization widely representative of citizens whose principal function is planning? .
11. To what extent are the following types of personnel available in the local schools-guidance counsellor, school physician, public health nurse, special needs resource teachers?
12. In which of the following ways does the school function as a community centre?
 - organizes adult education programs
 - makes classrooms/gym available to civic groups for religious/physical education/social purposes
 - presents forums, concerts
 - other
13. Is there a parent-teacher association? If so, what have been its principal activities in the past two years?
14. Is there a neighbourhood library? What services does it provide?
 - makes library rooms available
 - lends films/records
 - sponsors lectures
 - organizes exhibits
 - holds a story hour for children
 - provides space for play groups
15. What activities are available in the public recreation program? (e.g. swimming, dance, fitness, music appreciation, arts and crafts).

16. List the organizations in your community in the following areas. For each organization state how you might get information about this organization.

- service clubs
- political party organizations
- athletic teams
- community health groups
- social groups
- housing associations

17. Which organizations (public or private) engage in which of the following types of health education in your community? (sponsors lectures, distributes pamphlets, organizes displays, shows films)

18. In what types of health education do the local schools engage? (nutrition, drugs, physical education)

19. What are the formal channels of communication in this community? Name several informal channels of communication:

20. What local newspapers serve your community?

21. What radio and television stations are the most popular in your community?

22. Are there any special or annual events, communications, or festivals which bring members of the community together?

LEARNING ACTIVITY #20

OBTAINING RESOURCES

Identify at least three types of resources that would be required for a prevention program which will employ the mass media to inform the public about the hazards of excessive alcohol use. State as well why such a resource is required and where the resource may be sought or obtained.

RESOURCE

WHY NEEDED

WHERE OBTAINED

LEARNING ACTIVITY #21

RECRUITING PERSONNEL

Imagine that you are a prevention worker. You are coordinating a competence development effort which involves teaching decision-making skills to public school students. Your budget allows you to hire two staff persons to teach these skills. Identify at least five possible ways in which you might go about recruiting these individuals.

1. _____
2. _____
3. _____
4. _____
5. _____

LEARNING ACTIVITY #22

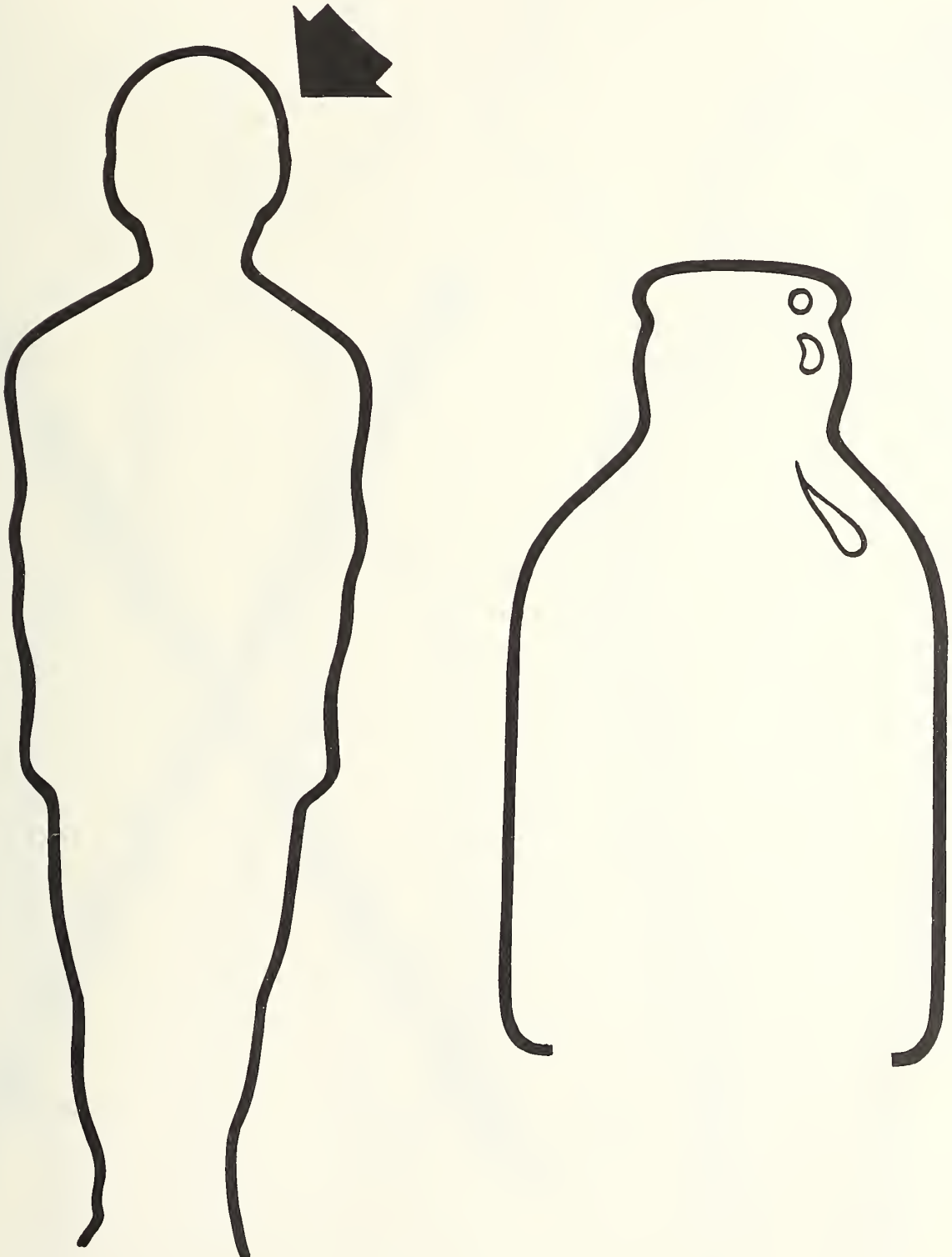
SUPERVISION

Select one particular supervisory experience in which you were or are involved as a paid employee, volunteer, or student and answer the following questions in relation to this experience.

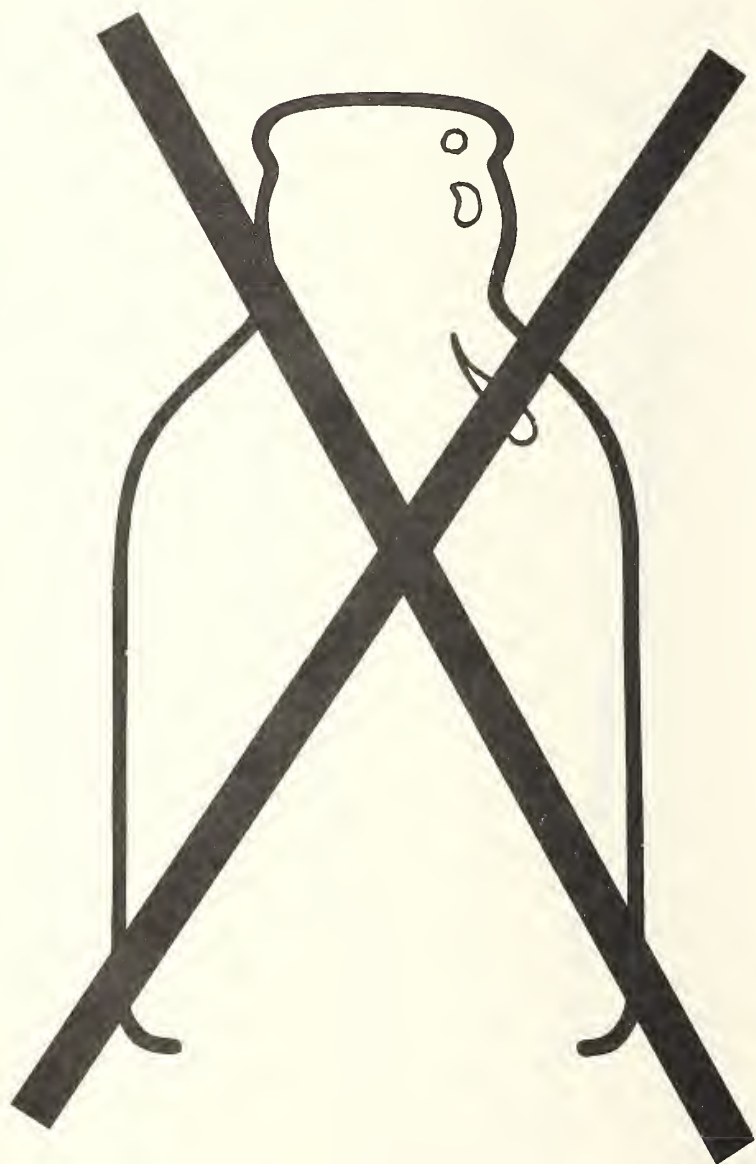
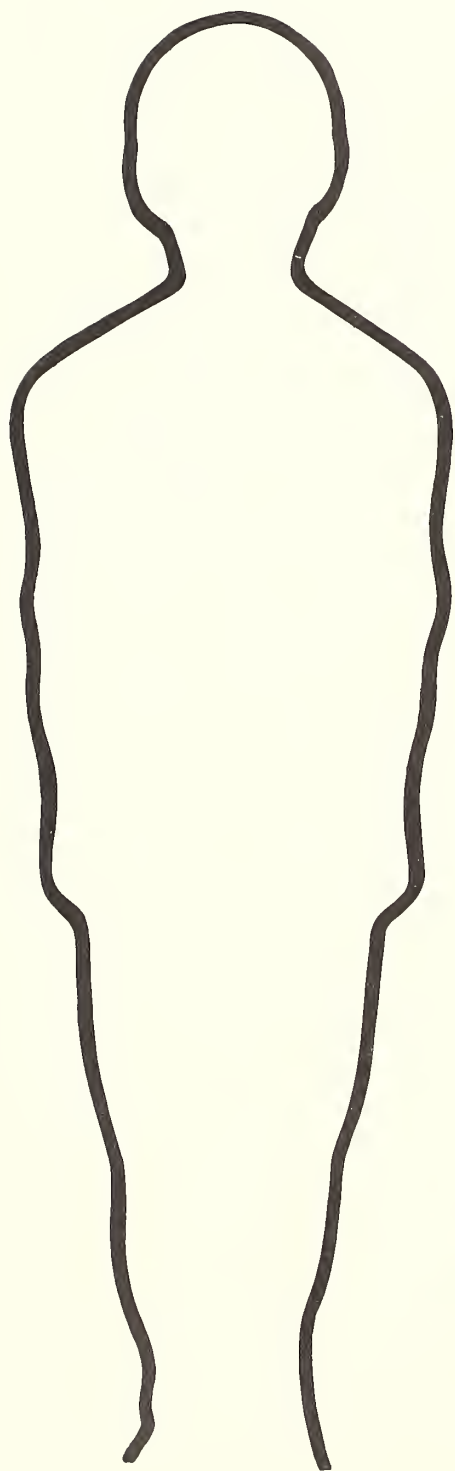
1. How often did you (do you) meet with your supervisor?
2. What issues or areas of practice were (are) discussed?
3. How did you (do you) prepare for these sessions?
4. How did your (does your) supervisor prepare for this session?
5. What supervisory behaviours did you (do you) find most helpful?
6. What aspects of supervision did you (do you) dislike?
7. Comment about how effectively your supervisor:
 - helped (helps) set guidelines for your work:
 - taught (teaches) new knowledge:
 - taught (teaches) new skills:
 - provided (provides) support, praise, encouragement:
8. What recommendations would you make to your supervisor for improving his or her helpfulness?
9. How often and by what means were you (are you) evaluated?
10. Did your supervisor ever conduct a formal performance appraisal? If yes, describe the instrument used and how the appraisal was carried out (e.g. Were objectives set? Did the supervisor only fill in a form or did both supervisor and worker complete a form?)

Visuals

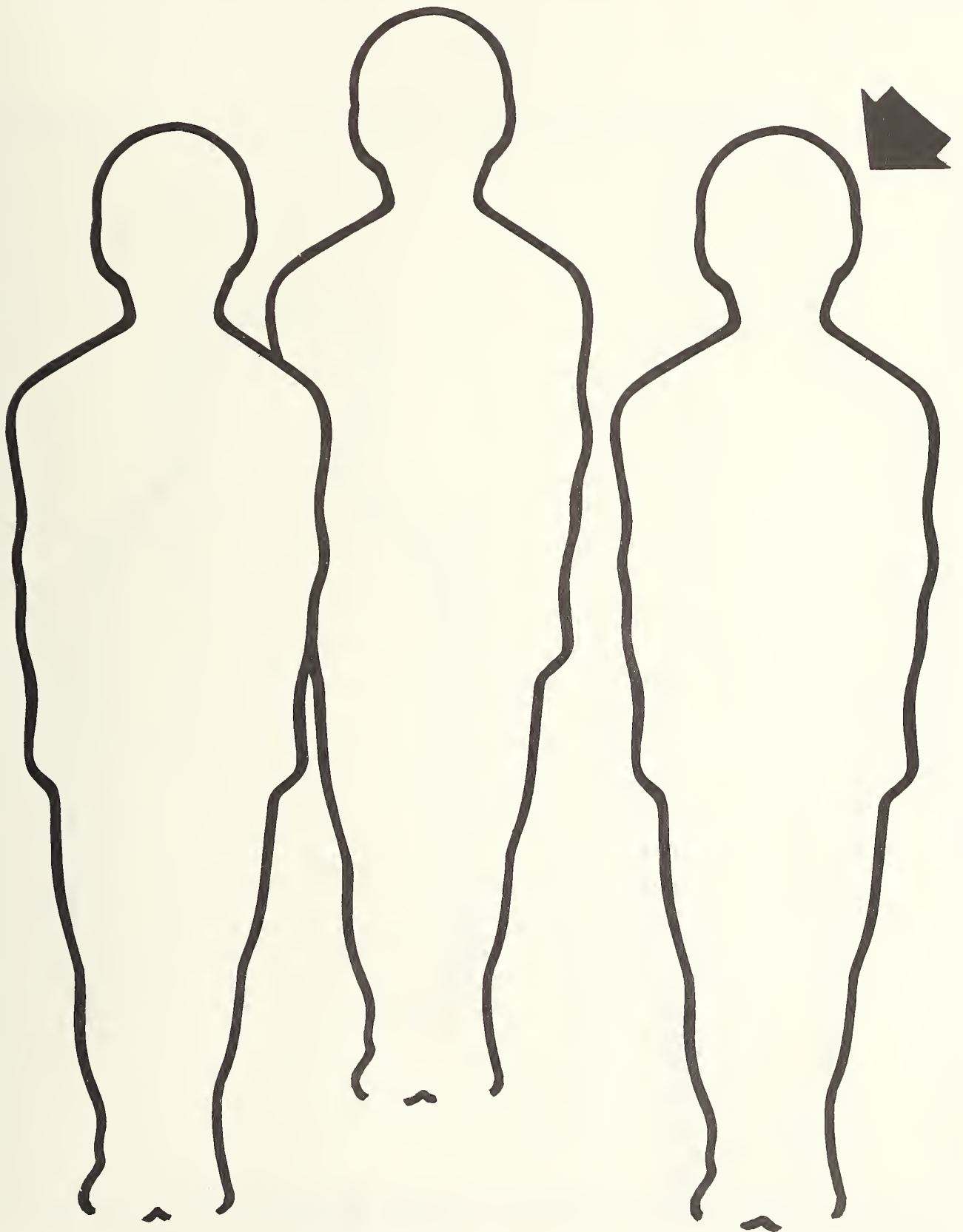
THE COLONIAL PERSPECTIVE



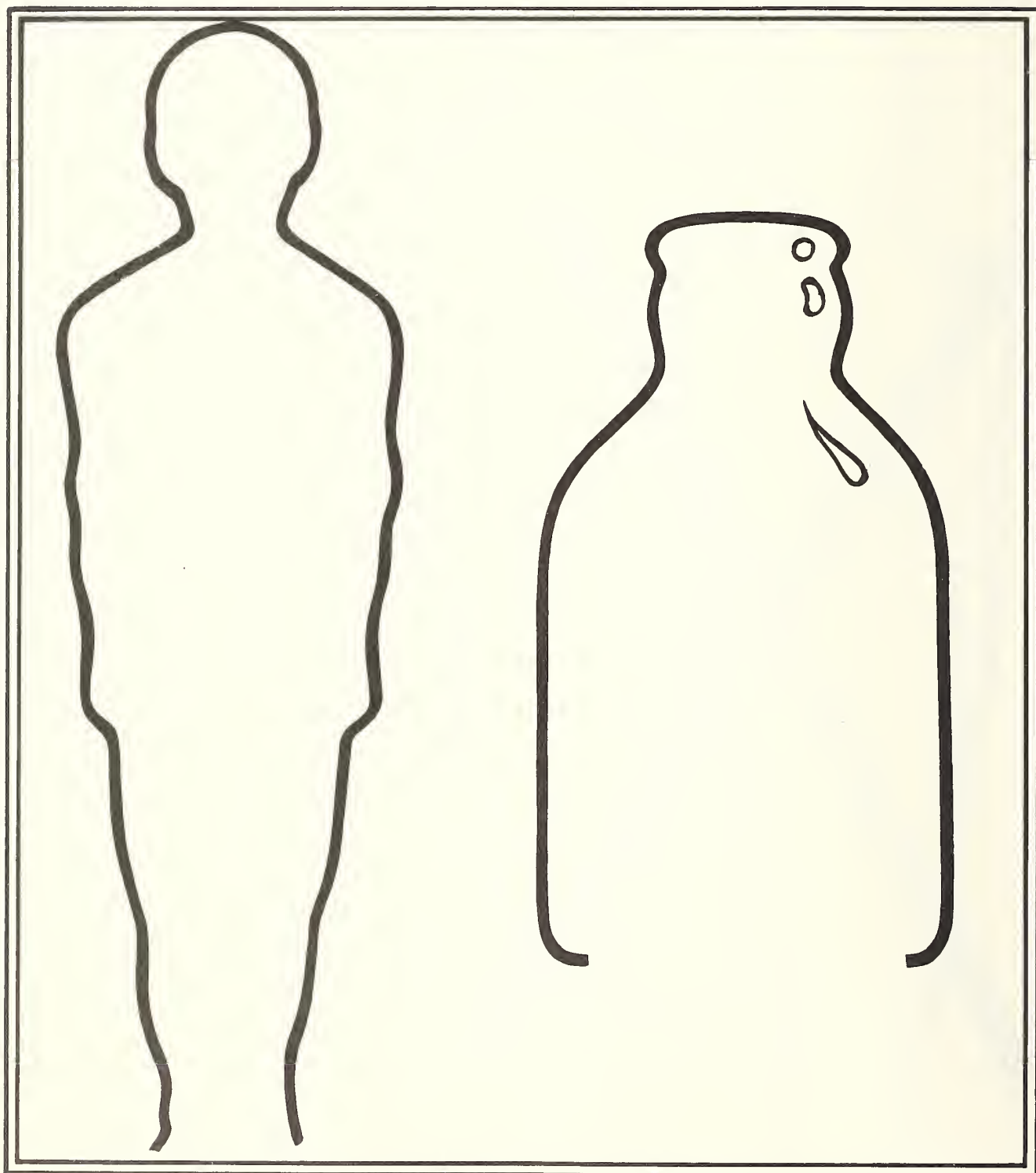
THE TEMPERANCE PERSPECTIVE



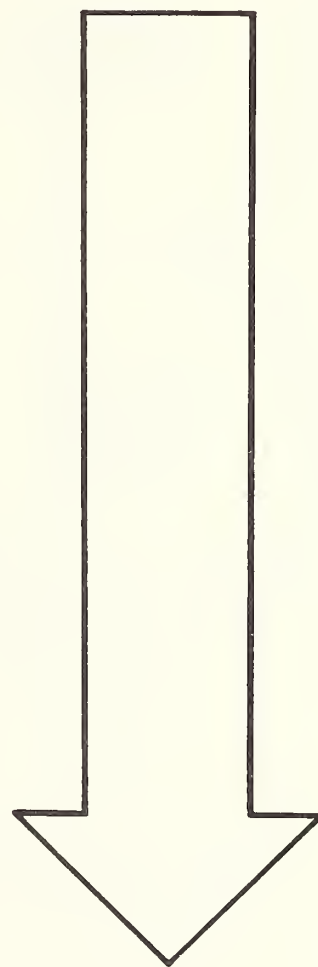
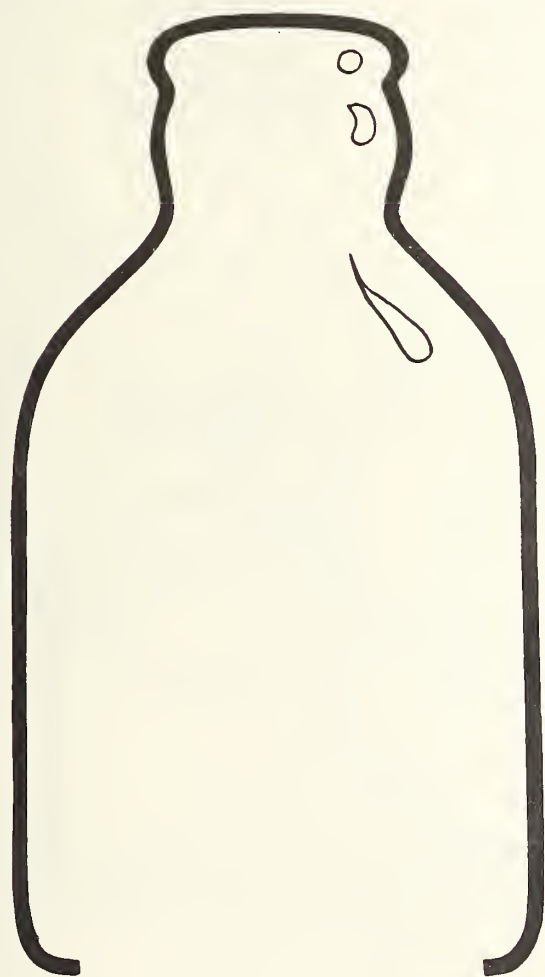
THE MEDICAL PERSPECTIVE



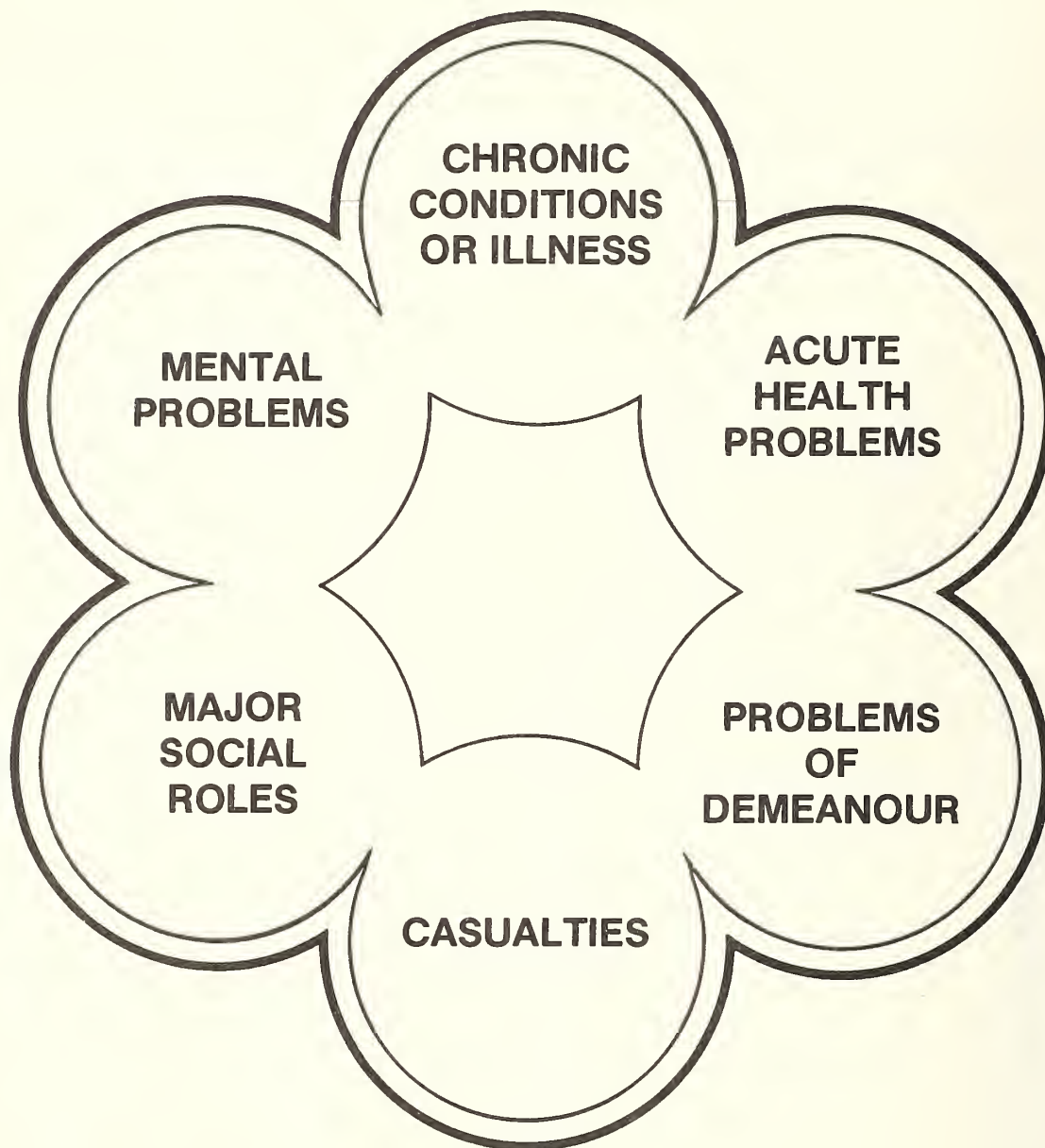
THE SOCIOCULTURAL PERSPECTIVE



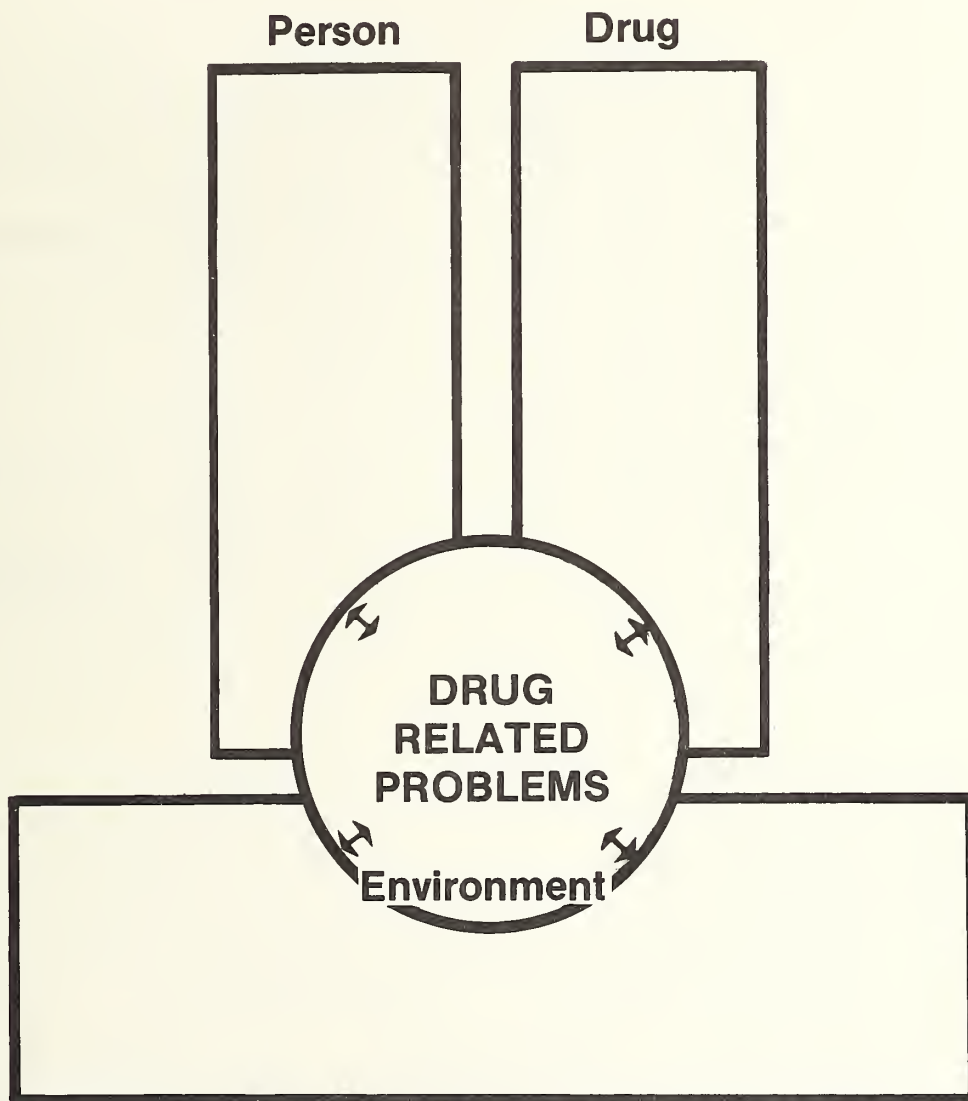
THE DISTRIBUTION OF CONSUMPTION PERSPECTIVE



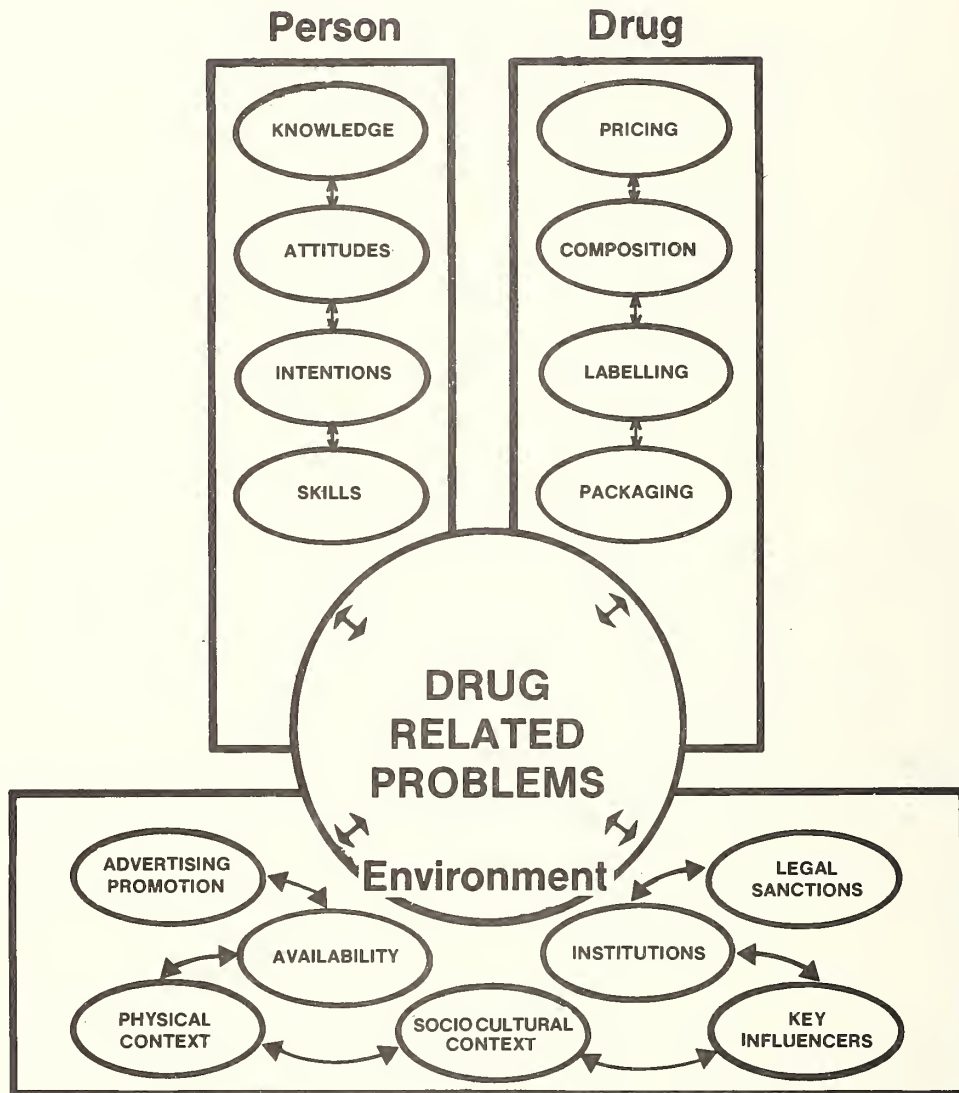
DRUG RELATED PROBLEMS



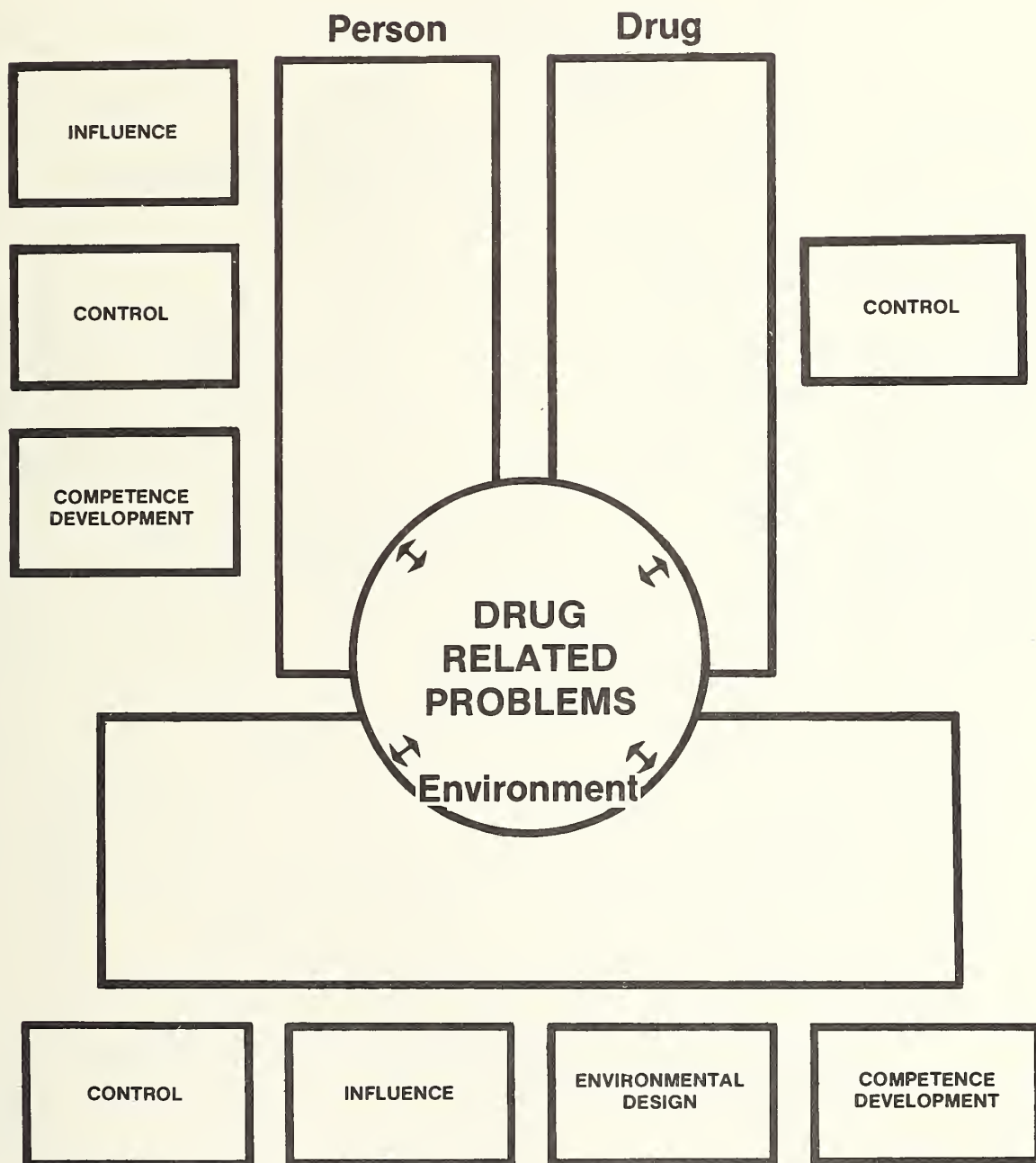
PREVENTION TARGETS



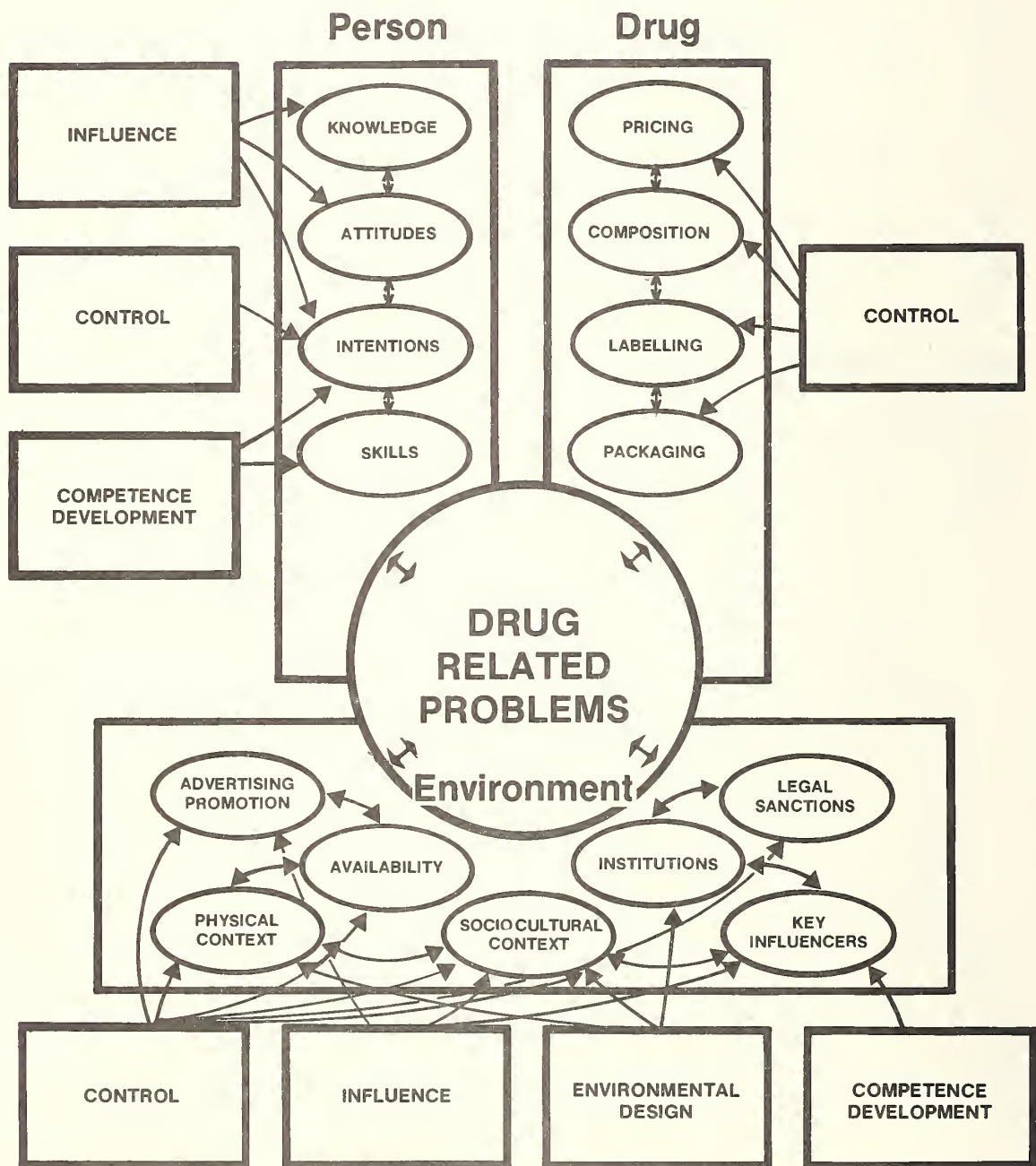
TARGET COMPONENTS



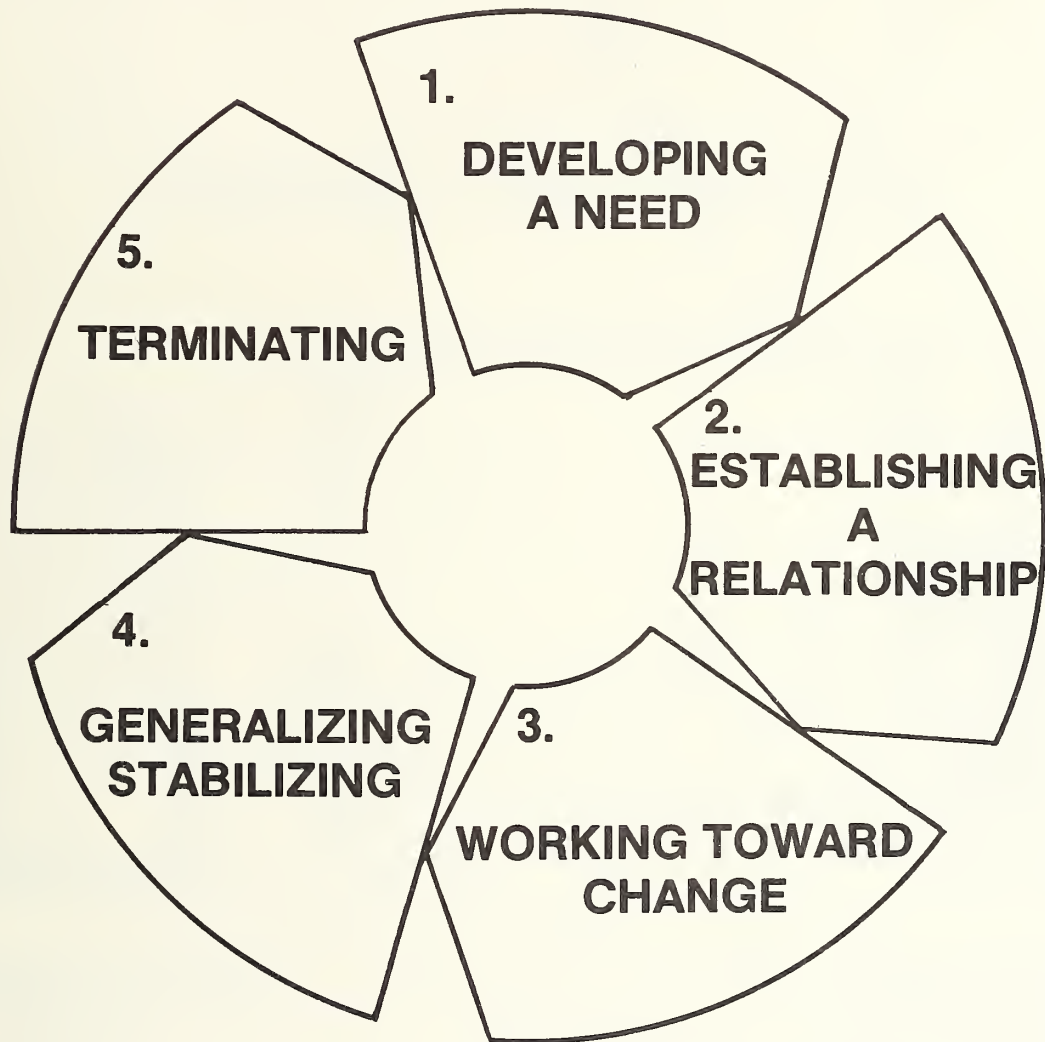
PREVENTION STRATEGIES



A CONCEPTUAL FRAMEWORK FOR PREVENTIVE ACTION



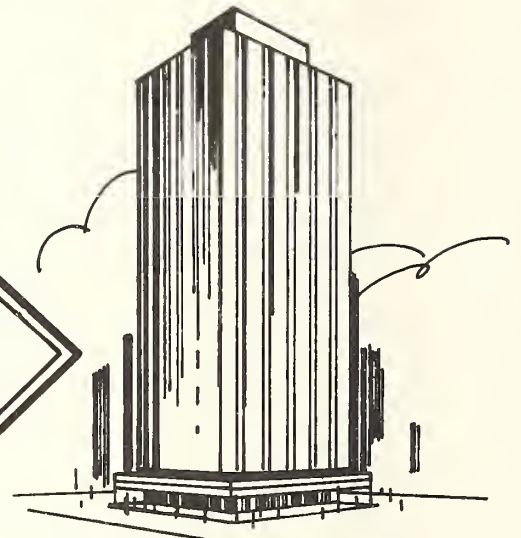
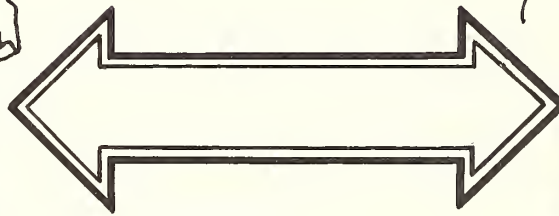
FIVE PHASES OF CHANGE



ENGAGING VOLUNTEERS IN PREVENTION

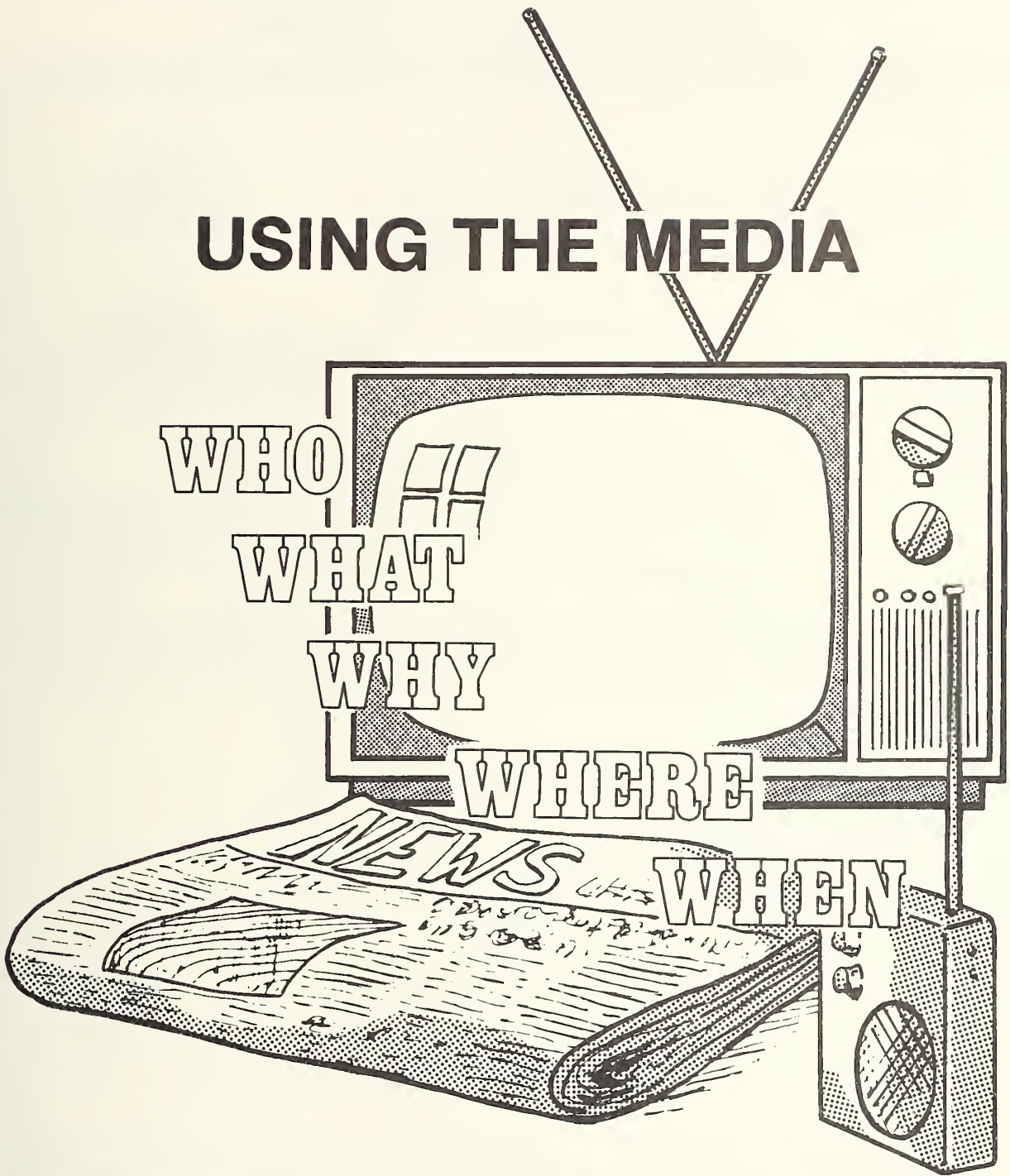


**Volunteer
Needs**



**Organizational
Needs**

USING THE MEDIA



PREPARING A REPORT



ESTIGATION



PLANNING



Writing

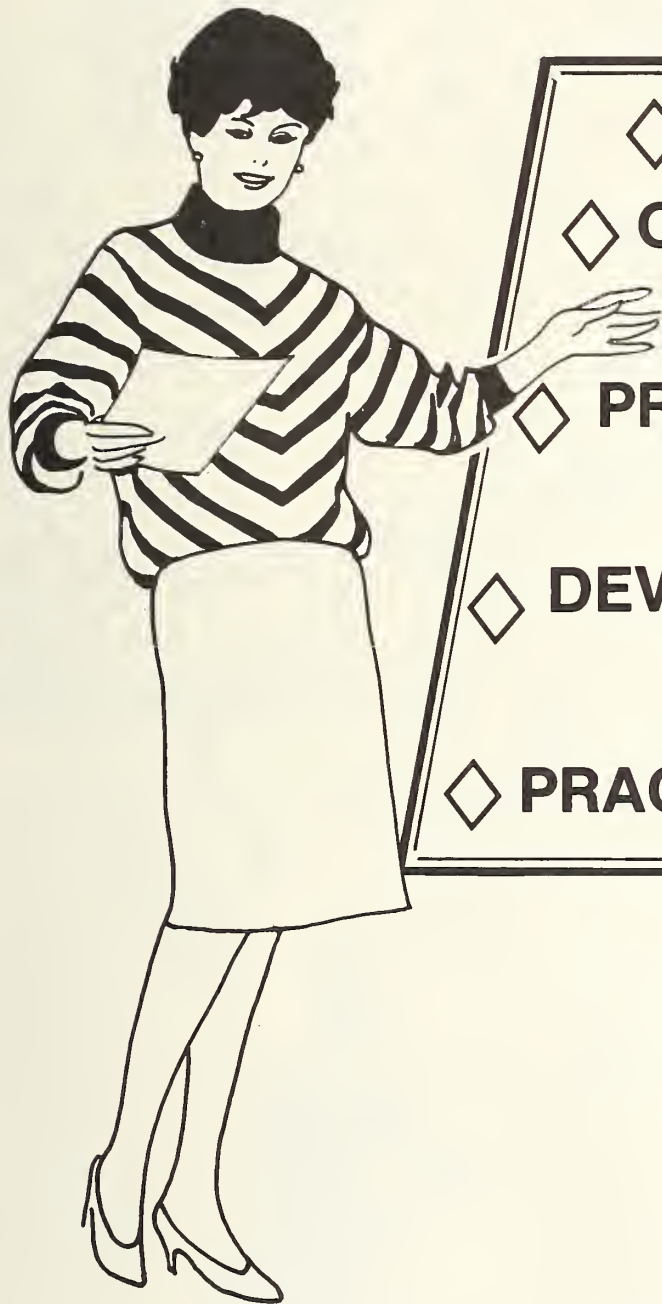


REVISION

CHANGING



PREPARING A VERBAL PRESENTATION



◇ PLANNING

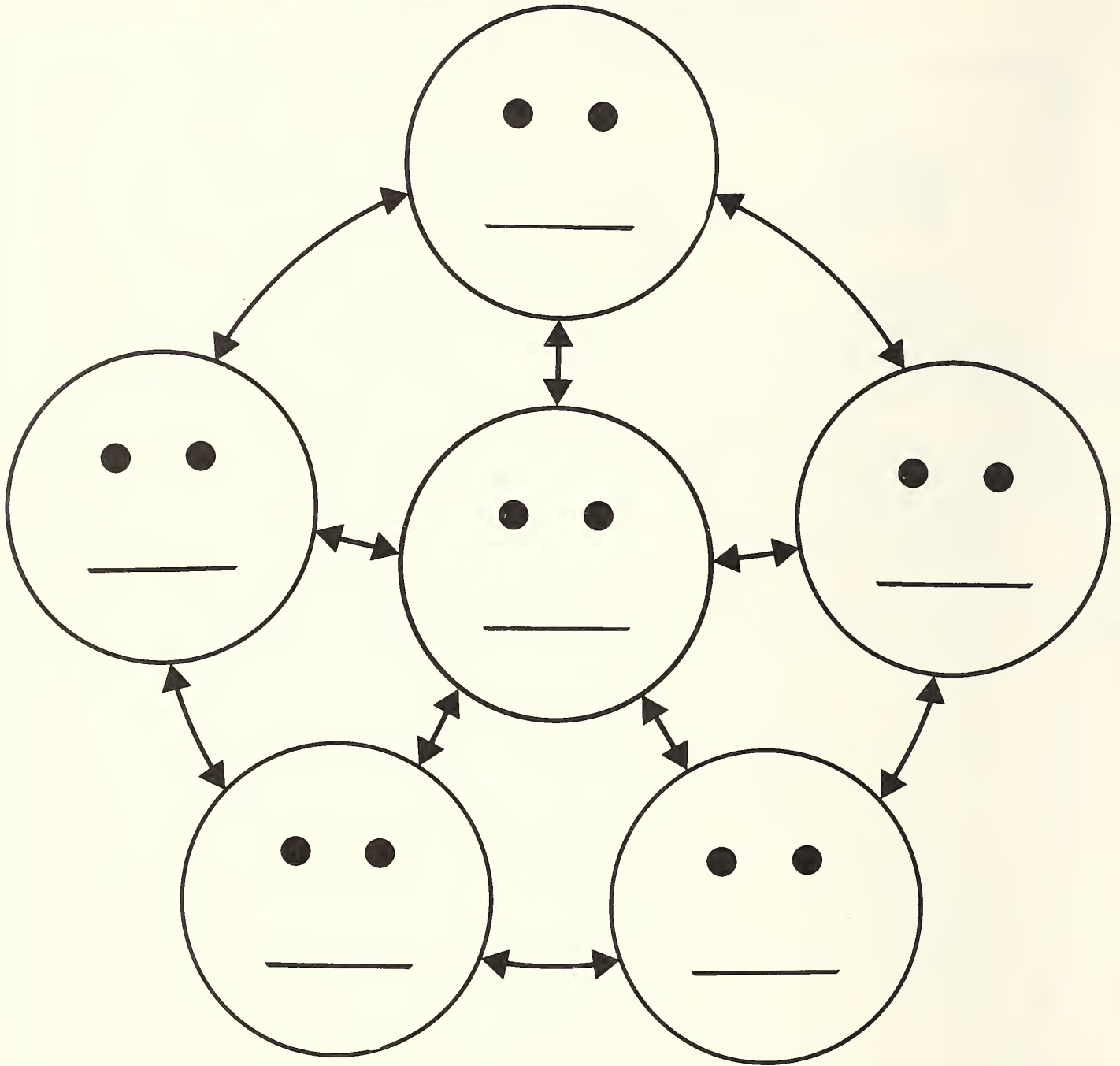
◇ GATHERING
INFORMATION

◇ PREPARING AN
OUTLINE

◇ DEVELOPING
PARAGRAPHS

◇ PRACTISING

MAINTAINING NETWORKS



MOBILIZING A COMMUNITY



KEY ACTORS



IDENTIFY CONCERNS



1.

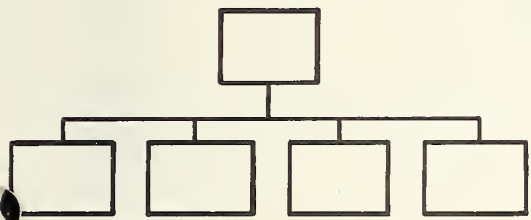
2.

3. **STATE OBJECTIVES**

4.



TAP RESOURCES

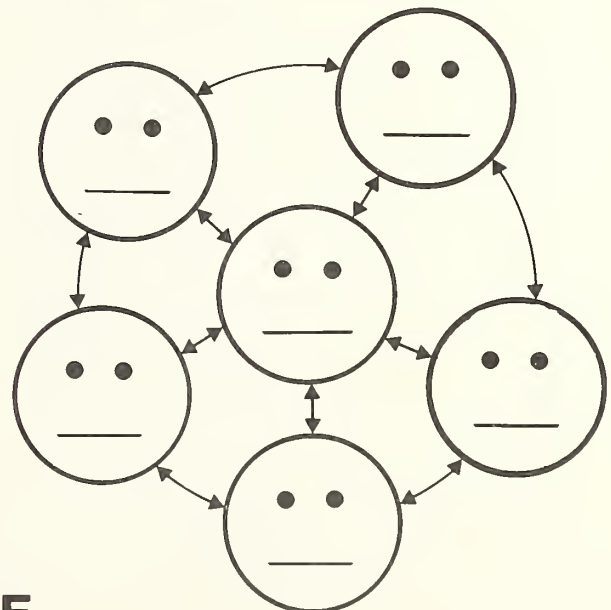


FORM ORGANIZATION

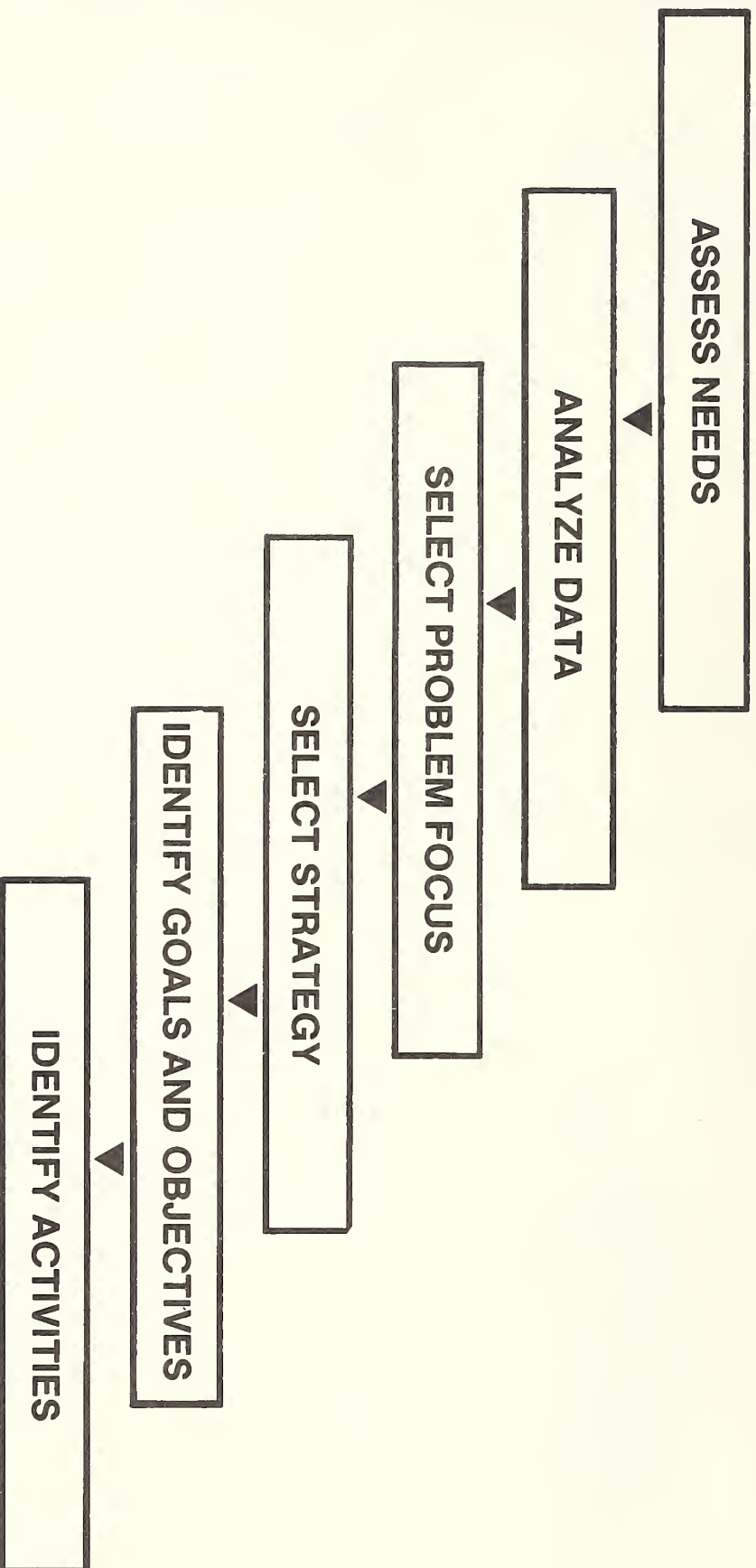


DESIGNATE LEADERS

ENSURE COMMUNICATIONS

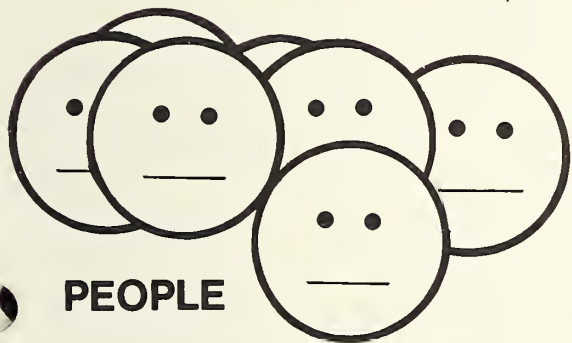


PROGRAM PLANNING



PROGRAM MANAGEMENT

MANAGER



PEOPLE



RESOURCES

SAT	SUN	MON	TUES	WED	THU	FRI
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

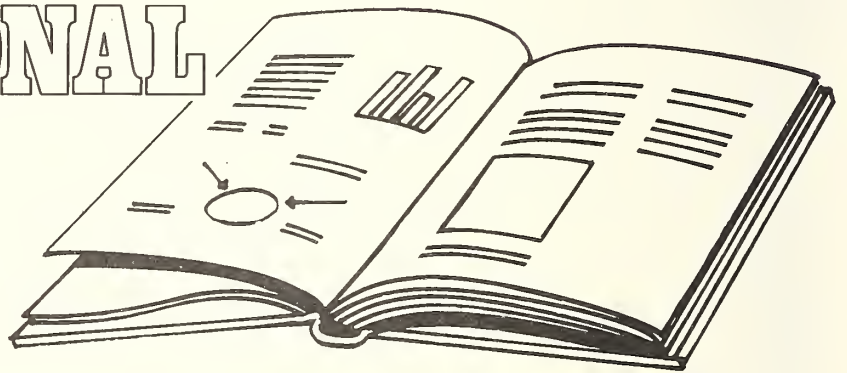
TIME MANAGEMENT

SUPERVISION

ADMINISTRATIVE

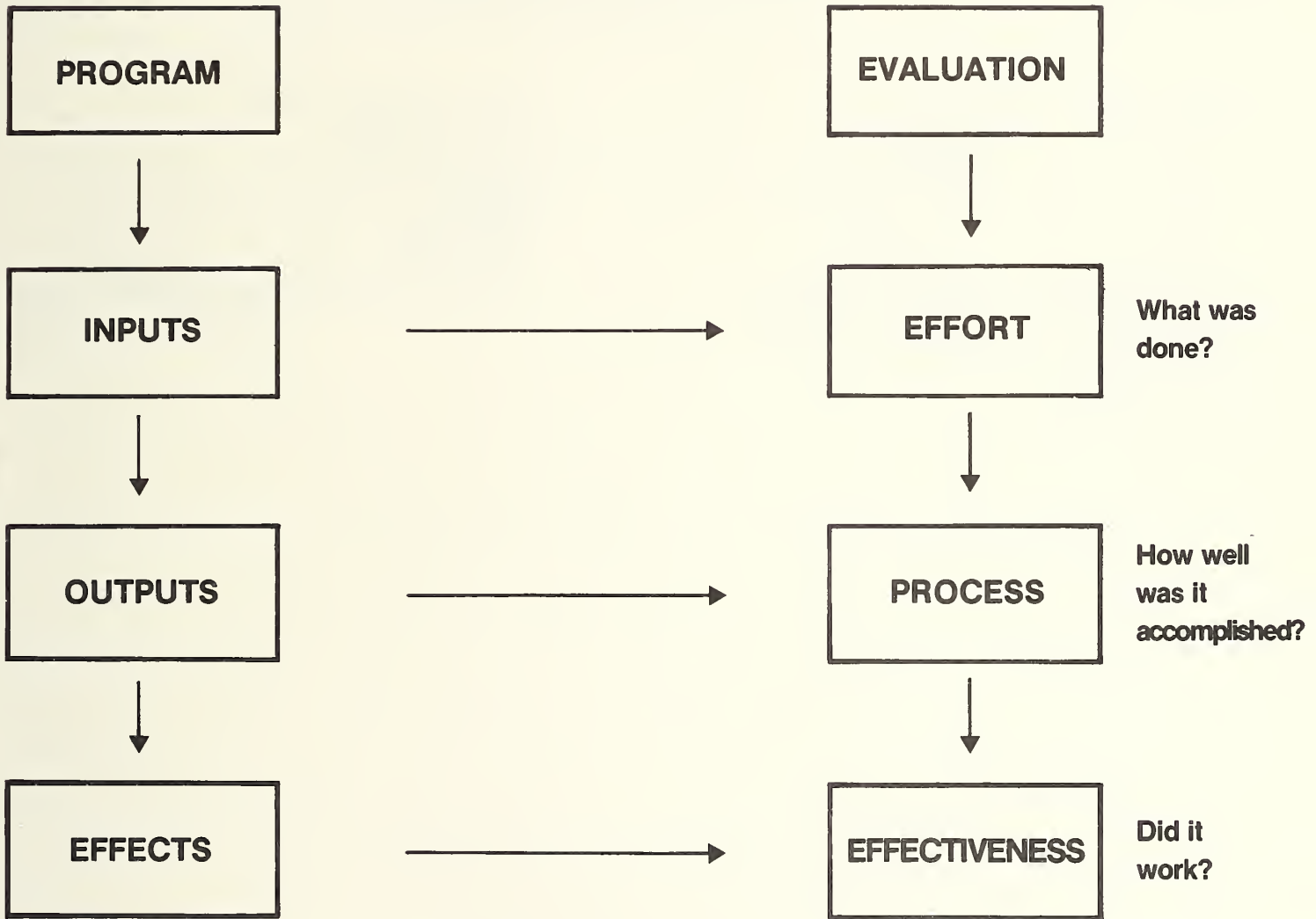
SAT	SUN	MON	TUES	WED	THU	FRI
1	2	3	4	5	6	7
8	9	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	31				

EDUCATIONAL



SUPPORTIVE

EVALUATION FOCUS



CASE DESIGN

GROUP # 1 : EXPERIMENTAL GROUP

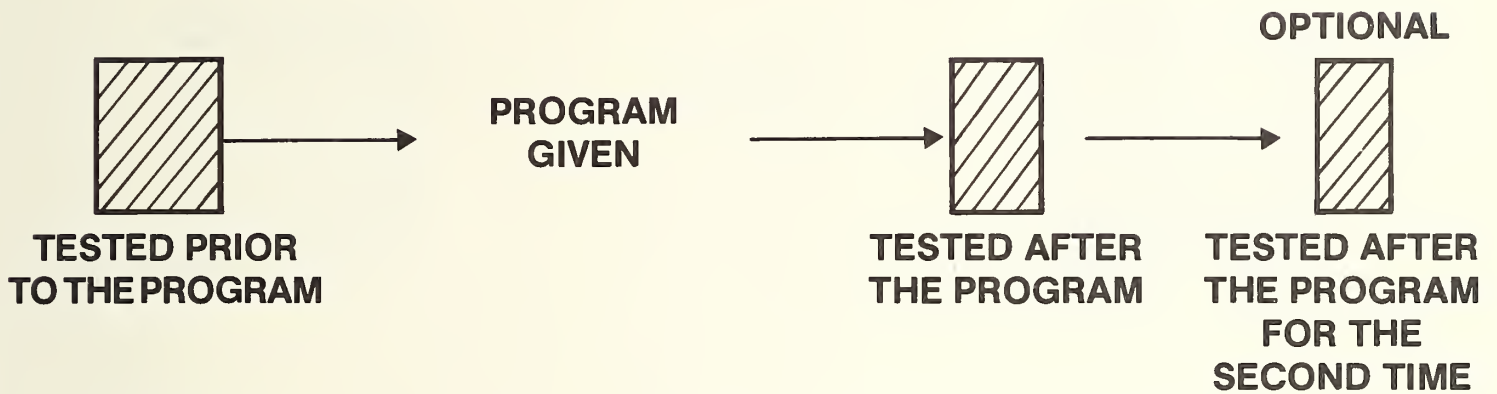
PROGRAM
GIVEN



TESTED
AFTER THE PROGRAM

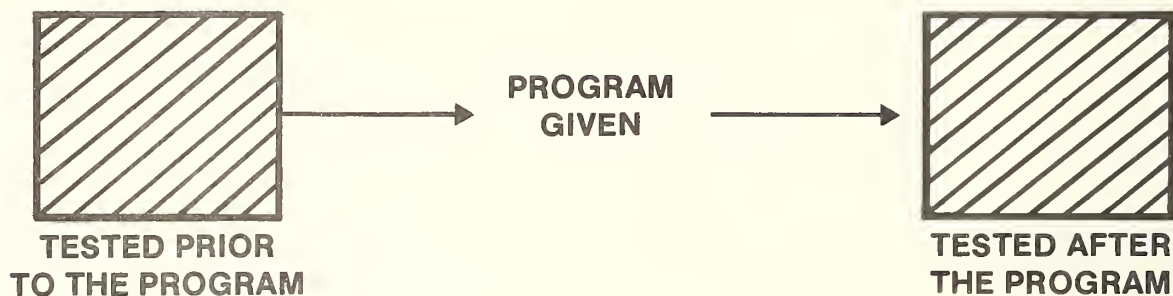
TIME SERIES DESIGN

GROUP # 1: EXPERIMENTAL GROUP

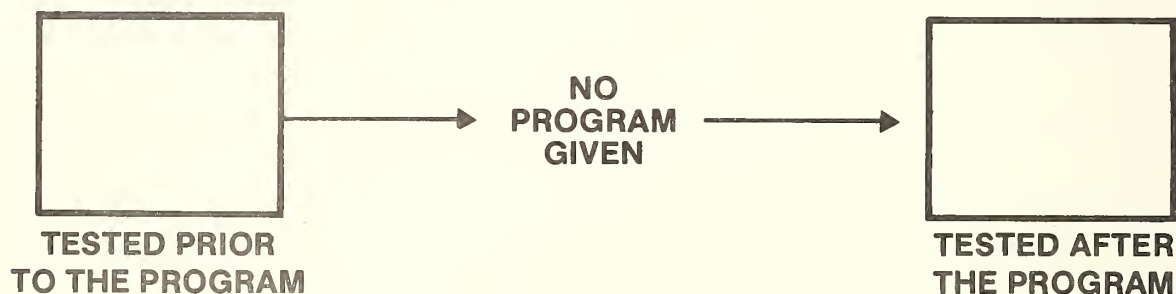


COMPARISON GROUP DESIGN

GROUP # 1 : EXPERIMENTAL GROUP



GROUP # 2 : CONTROL/COMPARISON GROUP



- Skills Assessment Forms
- Quiz on Unit "A"
- Program Evaluation Form



Skills Assessment Forms

SKILLS ASSESSMENT FORM #1

To be used in Unit B, Module 4 "Presentations".

Indicate whether the participant carried out the following actions by placing a tick () under the "yes" or "no" column.

	Yes	No
1. Were there no more than four or five major points made during the presentation?		
2. Did each major point made have supporting documentation?		
3. Was there an introduction, a "body", and a conclusion?		
4. Were visual aids used? If so, did they add to the presentation?		

SKILLS ASSESSMENT FORM #2

To be used in Unit C, Module 3 "Personnel Management".

Indicate whether the participant carried out the following actions by placing a tick () under the "yes" or "no" column.

	Yes	No
1. Did the supervisor clearly outline the tasks(s) to be carried out by the prevention worker?		
2. Were clear time guidelines set for the accomplishment of the tasks(s)?		
3. Did the supervisor ask for or provide suggestions as to how the task(s) could be accomplished?		
4. Did the supervisor provide reinforcement or support for the work that had already been done?		

Quiz on Unit A

QUIZ ON UNIT A

(5 points)

1. Identify the five major perspectives on alcohol that are discussed in the literature.

(5 points)

2. State one possible solution to alcohol-related problems that would be proposed by this perspective.

(3 points)

3. What are the three major types of theory that attempt to explain the causes of drug-related problems?

(4 points)

4. Identify at least four types of drug-related problems.

(1 point)

5. What is meant by a "positive correlate" of drug use?

(2 points)

6. Name at least two positive correlates of drug use.

(3 points)

7. What are the three major targets of preventive action?

(8 points)

8. Name at least two components of the first target, two components of the second target, and four components of the third target.

(8 points)

9. What are the four major prevention strategies? Identify at least one target of each strategy.

(1 point)

10. Can more than one strategy be employed at the same time? Provide an example.

QUIZ ON UNIT A

ANSWERS

1.
 - colonial
 - temperance
 - medical
 - sociocultural
 - distribution of consumption
2.
 - punish the individual
 - ban the sale of alcohol
 - treat the alcoholic individual
 - teach appropriate drinking behaviours
 - reduce the availability of alcohol
3.
 - biological
 - psychological
 - social
4.
 - chronic condition
 - acute health problem
 - social functioning
 - casualty (e.g. accident)
 - mental health problem
 - behavioural problem
5. A positive correlate of drug use is a factor that has been found to occur frequently in association with drug use.
6. Examples of positive correlates are:
 - parental disinterest, neglect, harsh discipline
 - peer pressure
 - easy access
 - desire to experiment, boredom
7.
 - person
 - drug
 - environment
8.
 - knowledge
 - attitudes
 - intentions
 - skills
 - labelling
 - composition
 - packaging
 - pricing
 - advertising/promotion
 - availability
 - physical context
 - legal sanctions
 - sociocultural context
 - institutions
 - key influencers
9.
 - influence(See Visual 10 for other answers)
 - control
 - competence development
 - environmental design
 - knowledge
 - availability
 - skills
 - institutions
10.
 - Yes. Raising the minimum drinking age (the control strategy) might be combined with an educational program which would attempt to explain to the public why this change was necessary (the influence strategy).

Program Evaluation Form



PROGRAM EVALUATION FORM

UNIT:

1. The Unit as a whole was . . .

stimulating	5 4 3 2 1 0	boring
crisp and captivating	5 4 3 2 1 0	long and tedious
informative	5 4 3 2 1 0	uninformative
time well spent	5 4 3 2 1 0	a waste of time

a) To me, the most worthwhile aspect of this Unit was. . .

b) The most frustrating aspect of this Unit was. . .

2. The information was presented in a manner that was. . .

clear and concise	5 4 3 2 1 0	confusing/unclear
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I would have treated the following topics differently (state how):

3. In terms of my job, the information provided in this Unit was. . .

highly relevant	5 4 3 2 1 0	irrelevant
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I would have concentrated more on the following topics:

4. The visuals used in this Unit were. . .

too simplistic	5 4 3 2 1 0	too complex
clarifying	5 4 3 2 1 0	confusing
relevant	5 4 3 2 1 0	irrelevant

a) I particularly liked the following visuals. . .

b) I thought that the following visuals should be changed or deleted. . .

5. The learning activities were. . .

too easy	5 4 3 2 1 0	too difficult
interesting	5 4 3 2 1 0	tedious
too many	5 4 3 2 1 0	too few
worthwhile	5 4 3 2 1 0	a waste of time

a) The following learning activities were the most useful:

b) In my opinion, the following learning activities should be changed or deleted. . .

6. The discussion groups were. . .

well structured	5 4 3 2 1 0	poorly structured
too large	5 4 3 2 1 0	too small
stimulating	5 4 3 2 1 0	boring
well run	5 4 3 2 1 0	poorly run

a) I think that it would have been better if the groups:

7. I will be able to apply the following areas of knowledge and skill to my own work situation:

8. Other comments:
